




FEMA

Memorandum

To: *Flood Insurance Manual* Subscribers

From: Anthony S. Lowe 
Director
Mitigation Division
Emergency Preparedness and Response Directorate

Date: April 1, 2004

Re: May 1, 2004, Revisions to the Producer's Edition of the *Flood Insurance Manual*

The National Flood Insurance Program (NFIP) is pleased to provide you with the latest updates to the Producer's Edition of the NFIP *Flood Insurance Manual*.

Your new revision pages contain all of the changes that will go into effect May 1, 2004. Changes are identified by a vertical bar in the margin of the amended pages, and related footers have been modified to reflect the May 1, 2004, effective date.

Following are highlights of the May 2004 revisions:

- Revised Part 2 of Flood Insurance Application to clarify crawl space and/or garage information. (APP section)
- Provided new rates and updated rating examples. (RATING, CONDO, PRP sections)
- Clarified rules regarding crawl spaces. (RATING section)
- Revised/reformatted text and tables to fully describe the newly expanded Preferred Risk Policy. (PRP section)

The NFIP is committed to providing up-to-date information so that you can assist your customers in securing the best flood insurance protection available for their individual needs.

Attachment

Change Record Page

Effective Date: May 1, 2004

Updates and corrections to the Producer's Edition of the NFIP *Flood Insurance Manual* are distributed semiannually. Each change is highlighted by a vertical bar in the margin of the page. The effective date of each page is shown in the bottom right corner.¹

Please keep this Change Record Page in your manual for reference.

Remove	Insert
v-vii	v-vii
GR 1-2, 7-10	GR 1-2, 7-10
APP 9-10	APP 9-10
RATE 1-14, 21-24, 29-30, 47-55	RATE 1-14, 21-24, 29-30, 47- 61
CONDO 7-20, 23-31	CONDO 7-20, 23-31
PRP 1-4	PR 1- 7
IND 1-4	IND 1-4

¹Pages bearing the new effective date but no change bar simply indicate that text has shifted from one page to another.

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GENERAL RULES

I. COMMUNITY ELIGIBILITY

A. Participating (Eligible) Communities

Flood insurance may be written only in those communities that have been designated as participating in the National Flood Insurance Program (NFIP) by the Federal Emergency Management Agency (FEMA).

B. Emergency Program

The Emergency Program is the initial phase of a community's participation in the NFIP. Limited amounts of coverage are available.

C. Regular Program

The Regular Program is the final phase of a community's participation in the NFIP. In this phase, a Flood Insurance Rate Map is in effect and full limits of coverage are available.

D. Maps

Maps of participating communities indicate the degree of flood hazard so that actuarial premium rates can be assigned for insurance coverage on properties at risk.

1. Flood Hazard Boundary Map (FHBM) - Usually the initial map of a community. Some communities entering the Regular Program will continue to use FHBMs renamed a Flood Insurance Rate Map (FIRM), if there is a minimum flood hazard.
2. Flood Insurance Rate Map (FIRM) - The official map of the community containing detailed actuarial risk premium zones.
3. Rescission - Participating communities in the Emergency Program remain in the Emergency Program if an FHBM is rescinded.

E. Probation

Probation, imposed by the FEMA Regional Director, occurs as a result of noncompliance with NFIP floodplain management criteria. A community is placed on probation for 1 year (may

be extended), during which time a \$50 surcharge is applied to all NFIP policies, including the Preferred Risk Policy, issued on or after the Probation Surcharge effective date. Probation is terminated if deficiencies are corrected. However, if a community does not take remedial or corrective measures while on probation, it can be suspended.

F. Suspension

Flood insurance may not be sold or renewed in communities that are suspended from the NFIP. When a community is suspended, coverage remains in effect until expiration. These policies cannot be renewed.

G. Non-Participating (Ineligible) Communities

When FEMA provides a non-participating community with a Flood Hazard Boundary Map (FHBM) or Flood Insurance Rate Map (FIRM) delineating its flood-prone areas, the community is allowed 1 year in which to join the NFIP. If the community chooses not to participate in the NFIP, flood insurance is not available.

H. Coastal Barrier Resources Act

Flood insurance may not be available for buildings and/or contents located in coastal barriers or otherwise protected areas. See the Coastal Barrier Resources System section for additional information.

I. Federal Land

Buildings and/or contents located on land owned by the federal government are eligible for flood insurance if the federal agency having control of the land has met floodplain management requirements. All federal land is recorded under the local community number even if that local community does not have jurisdiction.

II. POLICIES AND PRODUCTS AVAILABLE

A. Standard Flood Insurance Policy

The Standard Flood Insurance Policy (SFIP) consists of a Dwelling Form, a General Property Form, and a Residential Condominium Building Association Policy (RCBAP) Form.

B. Preferred Risk Policy

The Preferred Risk Policy (PRP) is available in moderate-risk flood zones B, C, and X. Formerly, only single-family and two- to four-family dwellings were eligible for coverage. Effective May 1, 2004, other residential and non-residential buildings became eligible for coverage. For information about specific eligibility requirements and other changes in the Preferred Risk Policy, see the PRP section of this manual.

C. Residential Condominium Building Association Policy (RCBAP)

The RCBAP is a condominium association policy that covers the common elements and all structural items of the units within a building. It also covers contents owned in common.

D. Mortgage Portfolio Protection Program (MPPP)

The Mortgage Portfolio Protection Program (MPPP) offers a force-placed policy available only through a Write Your Own Company.

E. Scheduled Building Policy

The Scheduled Building Policy is available to cover 2 to 10 buildings. The policy requires a specific amount of insurance to be designated for each building. To qualify, all buildings must have the same ownership and the same location. The properties on which the buildings are located must be contiguous.

F. Group Flood Insurance

Group Flood Insurance is issued by the NFIP Direct Program in response to a Presidential disaster declaration. Disaster assistance applicants, in exchange for a modest premium, receive a minimum amount of building and/or contents coverage for a 3-year policy period. An applicant may cancel the group policy at any time and secure a regular Standard Flood Insurance Policy through the NFIP.

III. BUILDING PROPERTY ELIGIBILITY

A. Eligible Buildings

Insurance may be written only on a structure with two or more outside rigid walls and a fully secured roof that is affixed to a permanent site. Buildings must resist flotation, collapse, and lateral movement. At least 51 percent of the actual cash value of buildings, including machinery and equipment, which are a part of the buildings, must be above ground level, unless the lowest level is at or above the Base Flood Elevation (BFE) and is below ground by reason of earth having been

used as insulation material in conjunction with energy-efficient building techniques.

1. Appurtenant Structures

The only appurtenant structure covered by the SFIP is a detached garage at the described location, which is covered under the Dwelling Form. Coverage is limited to no more than 10 percent of the limit of liability on the dwelling. Use of this insurance is at the policyholder's option but reduces the building limit of liability. The SFIP does not cover any detached garage used or held for use for residential (i.e., dwelling), business, or farming purposes.

2. Manufactured (Mobile) Homes/Travel Trailers

Eligible buildings also include:

- A *manufactured home* (a "manufactured home," also known as a mobile home, is a structure built on a permanent chassis, transported to its site in one or more sections, and affixed to a permanent foundation); or
- A *travel trailer* without wheels, built on a chassis and affixed to a permanent foundation, that is regulated under the community's floodplain management and building ordinances or laws.

NOTE: All references in this manual to manufactured (mobile) homes include travel trailers without wheels.

a. Manufactured (Mobile) Homes - New Policies Effective on or After October 1, 1982

To be insurable under the NFIP, a mobile home:

- Must be affixed to a permanent foundation. A permanent foundation for a manufactured (mobile) home may be poured masonry slab or foundation walls, or may be piers or block supports, either of which support the mobile home so that no weight is supported by the wheels and axles of the mobile home.
- Must be anchored if located in a Special Flood Hazard area. For flood insurance coverage, all new

19. Tennis Bubble
20. Tent
21. Time Sharing Unit Within Multi-Unit Building
22. Travel Trailer (unless converted to a permanent onsite building meeting the community's floodplain management permit requirements)
23. Water Treatment Plant (unless 51 percent of its actual cash value is above ground)

B. Contents Coverage

1. Automobiles--Including Dealer's Stock (assembled or not)
2. Bailee's Customer Goods--Including garment contractors, cleaners, shoe repair shops, processors of goods belonging to others, and similar risks
3. Contents Located in a Structure Not Eligible for Building Coverage
4. Contents Located in a Building Not Fully Walled and/or Contents Not Secured Against Flotation
5. Motorcycles--Including Dealer's Stock (assembled or not)
6. Motorized Equipment--Including Dealer's Stock (assembled or not)

C. Non-Residential Condominium Unit

The owner of a non-residential condominium unit cannot purchase a unit owner's policy. The association can purchase a condominium association policy to cover the entire building. Contents coverage only may be purchased by the unit owner.

VIII. POLICY EFFECTIVE DATE

A. Binders

No oral binder or contract is permitted. No written binder shall be effective unless issued with the express written authorization of the Federal Emergency Management Agency.

B. Start of Waiting Period

There is a standard 30-day waiting period for new applications and for endorsements to increase coverage.

1. If the application or endorsement form and the premium payment are received at the NFIP *within 10 days* from the date of application or endorsement request, or if mailed by certified mail within 4 days from the date of application or endorsement request, then the waiting period will be calculated from the *application or endorsement date*.
2. If the application or endorsement form and the premium payment are received at the NFIP *after 10 days* from the date of application or endorsement request, or are not mailed by certified mail within 4 days from the date of application or endorsement request, then the waiting period will be calculated from the *date the NFIP receives the application or endorsement*.

As used in VIII.B.1. and 2. above, the term "certified mail" extends to not only the U.S. Postal Service but also certain third-party delivery services. Acceptable third-party delivery services include Federal Express (FedEx), United Parcel Service (UPS), and courier services and the like that provide proof of mailing. Third-party delivery is acceptable if the delivery service provides documentation of the actual mailing date and delivery date to the NFIP insurer. Bear in mind that third-party delivery services deliver to street addresses but cannot deliver to U.S. Postal Service post office boxes.

C. Effective Date

1. New Policy (other than 2, 3, or 4 below)--The effective date of a new policy will be 12:01 a.m., local time, on the 30th calendar day after the application date and the presentment of premium. (Example: a policy applied for on May 3 will become effective 12:01 a.m., local time, on June 2.) The effective date of coverage is subject to the waiting period rule listed under B.1 or B.2 above.
2. New Policy (in connection with making, increasing, extending, or renewing a loan, whether conventional or otherwise)--Flood insurance, which is initially purchased in connection with the making, increasing, extending, or renewal of a loan, shall be effective at the time of loan closing, provided that the policy is applied for and the presentment of premium is made at or prior to the loan closing. (Example: presentment of premium and application date--April 3, refinancing--April 3 at 3:00

p.m., policy effective date--April 3 at 3:00 p.m.) This rule applies to all buildings regardless of flood zone. The waiting period rule listed under B.1 or B.2 above does not apply.

3. New Policy (in connection with mortgage portfolio reviews)--The 30-day waiting period does not apply when flood insurance is required as a result of a lender determining that a loan on a building in a Special Flood Hazard Area (SFHA) that does not have flood insurance coverage should be protected by flood insurance. The coverage is effective upon the completion of an application and the presentment of payment of premium. (Example: presentment of premium and application date--April 3, policy effective date--April 3.) The waiting period rule listed under B.1 or B.2 must be used.
4. New Policy (when the initial purchase of flood insurance is in connection with the revision or updating of a Flood Hazard Boundary Map or Flood Insurance Rate Map)--During the 13-month period beginning on the effective date of the map revision, the effective date of a new policy shall be 12:01 a.m., local time, following the day after the application date and the presentment of premium. This rule only applies where the Flood Hazard Boundary Map (FHBM) or Flood Insurance Rate Map (FIRM) is revised to show the building to be in a Special Flood Hazard Area (SFHA) when it had not been in an SFHA. (Example: FIRM revised--January 1, 1995, policy applied for and presentment of premium--August 3, 1995, policy effective date--August 4, 1995.) The waiting period rule listed under B.1 or B.2 above must be used.
5. New Policy (in connection with a condominium association's purchase of an RCBAP)--There is a 30-day waiting period when a condominium association is purchasing a Residential Condominium Building Association Policy (RCBAP) unless the condominium association is required to obtain flood insurance as part of the security for a loan under the name of the condominium association.
6. New Policy (submit-for-rate application)--With three exceptions (described below), the effective date of a new policy will be

12:01 a.m., local time, on the 30th calendar day after the presentment of premium. ■

The *three exceptions* are as follows.

First, there is no waiting period if the initial purchase of flood insurance on a submit-for-rate application is in connection with making, increasing, extending, or renewing a loan, provided that the policy is applied for and the presentment of premium is made at or prior to the loan closing. The waiting period rule listed under B.1 or B.2 above does not apply.

Second, the 30-day waiting period does not apply when flood insurance is required as a result of a lender determining that a loan which does not have flood insurance coverage should be protected by flood insurance, because the building securing a loan is located in an SFHA. The coverage is effective upon the completion of an application and the presentment of payment of premium. This exemption from the 30-day waiting period applies only to loans in SFHAs, i.e., those loans for which the statute requires flood insurance. The waiting period rule listed under B.1 or B.2 above must be applied.

Third, during the 13-month period beginning on the effective date of a map revision, the effective date of a new policy shall be 12:01 a.m., local time, following the day after the date the increased amount of coverage is applied for and the presentment of additional premium is made. This rule applies only on an initial purchase of flood insurance where the Flood Hazard Boundary Map (FHBM) or Flood Insurance Rate Map (FIRM) is revised to show the building to be in an SFHA when it had not been in an SFHA. The waiting period rule listed under B.1 or B.2 must be applied.

7. New Policy (rewrite Standard to PRP)--The 30-day waiting period does not apply when an insured decides to rewrite the existing policy at the time of renewal from Standard to a Preferred Risk Policy (PRP), provided that the selected PRP coverage limit amount is no higher than the next highest PRP amount above that which was carried on the Standard policy using the highest of building and contents coverage. In those cases where the Standard policy has only

one kind of coverage, either building or contents only, the 30-day waiting period applies.

In addition, if the structure is no longer eligible under the PRP or the insured decides to rewrite the existing PRP at renewal time to a Standard policy, the 30-day waiting period does not apply provided the coverage limit amount is no more than the previous PRP coverage amount or the next highest PRP amount above that.

8. New Policy (contents only)--Unless the contents are part of the security for a loan, the 30-day waiting period applies to the purchase of contents-only coverage.
9. New Policy (documentation required)--The insurer may rely on an agent's representation on the application that the loan exception applies unless there is a loss during the first 30 days of the policy period. In that case, the insurer must obtain documentation of the loan transaction, such as settlement papers, before adjusting the loss.
10. Community's Initial Entry or Conversion from Emergency to Regular Program--Process according to rules 1 through 9 above and 11 below.
11. Endorsements--With two exceptions (described below), the effective date for a new coverage or an increase in limits on a policy in force shall be 12:01 a.m., local time, on the 30th calendar day following the date of endorsement and the presentment of additional premium, or on such later date set by the insured to conform with the reason for the change.

The *two exceptions* are as follows.

First, during the 13-month period beginning on the effective date of a map revision, the effective date of an endorsement of an existing policy shall be 12:01 a.m., local time, following the day after the application date and the presentment of premium. This rule applies only where the FHBM or FIRM is revised to show the building to be in an SFHA when it had not been in an SFHA.

Second, the 30-day waiting period does not apply when the additional amount of flood insurance is required in connection with the making, increasing, extending, or renewing

of a loan, such as a second mortgage, home equity loan, or refinancing. The increased amount of flood coverage shall be effective at the time of loan closing, provided that the increased amount of coverage is applied for and the presentment of additional premium is made at or prior to the loan closing. The waiting period rule listed under B.1 or B.2 above does not apply.

12. Renewals (inflation increase option)--The 30-day waiting period does not apply when an additional amount of insurance is requested at renewal time that is no more than the amount of increase recommended by the insurer on the renewal bill to keep pace with inflation. The increased amount of coverage will be effective at 12:01 a.m. on the date of policy renewal provided the premium for the increased coverage is received before the expiration of the grace period.
13. Renewals (higher PRP limits)--The waiting period does not apply to a renewal offer to the insured for the next higher limits available under the PRP.
14. Renewals (deductible reduction)--The 30-day waiting period does not apply to a reduction of the deductible effective as of the renewal date.

IX. COVERAGE

A. Limits of Coverage

Coverage may be purchased subject to the maximum limits of coverage available under the Program phase in which the community is participating. Duplicate policies are not allowed.

B. Deductibles

Deductibles apply separately to building coverage and to contents coverage.

C. Coverage D - Increased Cost of Compliance (ICC) Coverage

For all new and renewal policies effective on or after May 1, 2003, the ICC limit of liability is \$30,000.

The SFIP pays for complying with a State or local floodplain management law or ordinance affecting repair or reconstruction of a structure suffering flood damage. Compliance activities eligible for

payment are: elevation, floodproofing, relocation, or demolition (or any combination of these activities) of the insured structure. Eligible floodproofing activities are limited to non-residential structures and residential structures with basements that satisfy FEMA's standards published in the Code of Federal Regulations [44 CFR 60.6 (b) or (c)].

ICC coverage is mandatory for all Standard Flood Insurance Policies, except that coverage is not available for:

1. Policies issued or renewed in the Emergency Program.
2. Condominium units, including townhouse/rowhouse condominium units. (The condominium association is responsible for complying with mitigation requirements.)
3. Group Flood Insurance Policies.
4. Appurtenant structures, unless covered by a separate policy.

ICC coverage contains exclusions in addition to those highlighted here. See the policy for a list of exclusions.

To be eligible for claim payment under ICC, a structure must:

- a. Be a repetitive loss structure as defined, for which NFIP paid a previous qualifying claim, in addition to the current claim. The state or community must have a cumulative, substantial damage provision or repetitive loss provision in its floodplain management law or ordinance being enforced against the structure; *OR*
- b. Be a structure that has sustained substantial flood damage. The state or community must have a substantial damage provision in its floodplain management law or ordinance being enforced against the structure.

The ICC premium is not eligible for the deductible discount. First calculate the deductible discount, then add in the ICC premium for each policy year.

D. Reduction of Coverage Limits or Reformation

In the event that the premium payment received is not sufficient to purchase the amounts of insurance requested, the policy shall be deemed to provide only such insurance as can be purchased for the entire term of the policy for the amount of premium received.

Complete provisions for reduction of coverage limits or reformation are described in:

1. Dwelling Form, section VII, paragraph G.
2. General Property Form, section VII, paragraph G.
3. Residential Condominium Building Association Policy, section VIII, paragraph G.

X. SPECIAL RATING SITUATIONS

A. Tentative Rates

Tentative rates are applied when producers are unable to provide all required underwriting information necessary to rate the policy. Tentatively rated policies cannot be endorsed to increase coverage limits or renewed for another policy term until required actuarial rating information and full premium payment are received by the NFIP. If a loss occurs on a tentatively rated policy, the loss payment will be limited by the amount of coverage that the premium initially submitted will purchase (using the correct actuarial rating information), and not the amount requested by application.

B. Submit-For-Rate

Some risks, because of their unique underwriting characteristics, cannot be rated using this manual. Certain risks must be submitted to the NFIP Underwriting Unit to determine the appropriate rate. Refer to page GR 8 for the applicable waiting period.

Submit-for-rate policies must be rerated annually using the newest rates. If the NFIP Direct or WYO company does not have all the underwriting information, it must request the missing information from the insured in order to properly rate the risk.

Pre-FIRM risks may not be rated using the submit-for-rate process.

C. Provisional Rates

Rules applicable to provisionally rated policies are provided in the Provisional Rating section of this manual.

D. Buildings in More Than One Flood Zone

Buildings, not the land, located in more than one flood zone must be rated using the more hazardous zone.

**U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY**

National Flood Insurance Program

IMPORTANT— PLEASE PRINT OR TYPE

O.M.B. No. 1660-0006 Expires July 31, 2006
PART 1 (OF 2) OF FLOOD INSURANCE APPLICATION

CURRENT POLICY NUMBER
☐ NEW
☐ RENEWAL FL _____

POLICY TERM	DIRECT BILL INSTRUCTIONS: <input type="checkbox"/> BILL INSURED <input type="checkbox"/> BILL FIRST MORTGAGEE <input type="checkbox"/> BILL SECOND MORTGAGEE <input type="checkbox"/> BILL LOSS PAYEE <input type="checkbox"/> BILL OTHER		POLICY PERIOD IS FROM _____ TO _____ 12:01 A.M. LOCAL TIME AT THE INSURED PROPERTY LOCATION WAITING PERIOD: <input type="checkbox"/> STANDARD 30-DAY INITIAL PURCHASE OF FLOOD INSURANCE RELATED TO: <input type="checkbox"/> LOAN—NO WAITING <input type="checkbox"/> MAP REV. (ZONE CHANGE FROM NON-SFHA TO SFHA)—ONE DAY																																							
	ADDRESS OF LICENSED PROPERTY OR CASUALTY INSURANCE AGENT OR BROKER: AGENCY NO.: _____ AGENTS' TAX ID <input type="checkbox"/> T OR SSN <input type="checkbox"/> S PHONE NO.: _____ FAX NO.: _____		NAME, MAILING ADDRESS, AND TELEPHONE NO. OF INSURED: INSURED'S SOCIAL SECURITY NUMBER: _____																																							
AGENT INFORMATION	IS INSURANCE REQUIRED FOR DISASTER ASSISTANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, CHECK THE GOVERNMENT AGENCY: <input type="checkbox"/> SBA <input type="checkbox"/> FEMA <input type="checkbox"/> FHA ENTER CASE FILE NUMBER OR INSURED'S SOCIAL SECURITY NUMBER _____ <input type="checkbox"/> OTHER (SPECIFY): _____																																									
	NAME AND ADDRESS OF FIRST MORTGAGEE LOAN NO.: _____ PHONE NO.: _____ FAX NO.: _____		IF SECOND MORTGAGEE, LOSS PAYEE OR OTHER IS TO BE BILLED, THE FOLLOWING MUST BE COMPLETED, INCLUDING THE NAME AND ADDRESS: <input type="checkbox"/> 2ND MORTGAGEE <input type="checkbox"/> DISASTER AGENCY <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> IF OTHER, PLEASE SPECIFY: _____																																							
DISASTER ASSIST.	IS INSURED PROPERTY LOCATION SAME AS INSURED MAILING ADDRESS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ENTER PROPERTY ADDRESS. IF RURAL, DESCRIBE PROPERTY LOCATION (DO NOT USE P.O. BOX). LOAN NO.: _____ PHONE NO.: _____ FAX NO.: _____																																									
	NAME OF COUNTY/PARISH _____ LOCATED IN AN UNINCORPORATED AREA OF THE COUNTY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO COMMUNITY NO./PANEL NO. AND SUFFIX FOR LOCATION OF PROPERTY INSURED _____ COMMUNITY PROGRAM TYPE IS: <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> EMERGENCY																																									
FIRST MORTGAGE	IS BUILDING IN SPECIAL FLOOD HAZARD AREA? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FLOOD INSURANCE RATE MAP ZONE _____																																									
	BUILDING OCCUPANCY RESIDENTIAL: <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> 2-4 FAMILY <input type="checkbox"/> OTHER RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL (INCLUDING HOTELS/MOTELS) BASEMENT OR ENCLOSED AREA BELOW AN ELEVATED BUILDING: <input type="checkbox"/> NONE <input type="checkbox"/> FINISHED <input type="checkbox"/> UNFINISHED DOES INSURED QUALIFY AS A SMALL BUSINESS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																									
PROPERTY LOCATION	NUMBER OF FLOORS IN ENTIRE BUILDING (INCLUDE BASEMENT/ENCLOSED AREA, IF ANY) OR BUILDING TYPE: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 OR MORE <input type="checkbox"/> SPLIT LEVEL <input type="checkbox"/> TOWNHOUSE/ROWHOUSE (RCBP LOWRISE ONLY) <input type="checkbox"/> MANUFACTURED (MOBILE) HOME ON FOUNDATION IF NOT A SINGLE FAMILY DWELLING, THE NUMBER OF OCCUPANCIES (UNITS) IS _____ CONDO COVERAGE IS FOR: <input type="checkbox"/> UNIT <input type="checkbox"/> ENTIRE BUILDING		RESIDENTIAL CONDOMINIUM BUILDING ASSOCIATION POLICY ONLY: TOTAL NUMBER OF UNITS (INCLUDE NON-RES): <input type="checkbox"/> HIGH-RISE <input type="checkbox"/> LOW-RISE ESTIMATED REPLACEMENT COST IF SINGLE FAMILY PRINCIPAL RESIDENCE, RCBP OR ANY V-ZONE BUILDING AMOUNT \$ _____ IS BUILDING INSURED'S PRINCIPAL RESIDENCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS THIS BUILDING IN THE COURSE OF CONSTRUCTION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																							
	DEDUCTIBLE: <input type="checkbox"/> BUILDING \$ _____ <input type="checkbox"/> CONTENTS \$ _____ DEDUCTIBLE BUYBACK? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING ELEVATED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF BUILDING IS ELEVATED, COMPLETE PART 2 OF THE FLOOD INSURANCE APPLICATION. IF YES, AREA BELOW IS: <input type="checkbox"/> FREE OF OBSTRUCTION <input type="checkbox"/> WITH OBSTRUCTION		DESCRIBE BUILDING AND USE IF NOT A 1-4 FAMILY DWELLING FOR MANUFACTURED (MOBILE) HOMES, COMPLETE PART 2, SECTION III. IS INSURED PROPERTY OWNED BY STATE GOVERNMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																							
COMMUNITY	CONTENTS LOCATED IN: <input type="checkbox"/> BASEMENT/ENCLOSURE <input type="checkbox"/> BASEMENT/ENCLOSURE AND ABOVE <input type="checkbox"/> LOWEST FLOOR ONLY ABOVE GROUND LEVEL <input type="checkbox"/> LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER <input type="checkbox"/> ABOVE GROUND LEVEL MORE THAN ONE FULL FLOOR (IF SINGLE FAMILY, CONTENTS ARE RATED THROUGHOUT THE BUILDING) IS PERSONAL PROPERTY HOUSEHOLD CONTENTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE DESCRIBE: _____																																									
	ALL BUILDINGS: CHECK ONE OF THE FIVE BLOCKS: <input type="checkbox"/> BUILDING PERMIT DATE OR <input type="checkbox"/> DATE OF CONSTRUCTION ____/____/____ (MM/DD/YY) <input type="checkbox"/> SUBSTANTIAL IMPROVEMENT DATE ____/____/____ (MM/DD/YY) <input type="checkbox"/> MANUFACTURED (MOBILE) HOMES LOCATED IN A MOBILE HOME PARK OR SUBDIVISION: CONSTRUCTION DATE OF MOBILE HOME PARK OR SUBDIVISION FACILITIES ____/____/____ (MM/DD/YY) <input type="checkbox"/> MANUFACTURED (MOBILE) HOMES LOCATED OUTSIDE A MOBILE HOME PARK OR SUBDIVISION: DATE OF PERMANENT PLACEMENT ____/____/____ (MM/DD/YY)																																									
BUILDING	IS BUILDING POST-FIRM CONSTRUCTION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO BUILDING DIAGRAM NUMBER _____ LOWEST ADJACENT GRADE (LAG) _____ IF POST-FIRM CONSTRUCTION IN ZONES A, A1-A30, AE, AO, AH, V, V1-V30, VE, OR IF PRE-FIRM CONSTRUCTION IS ELEVATION RATED, ATTACH CERTIFICATION. LOWEST FLOOR ELEVATION _____ (-) BASE FLOOD ELEVATION _____ (=) DIFFERENCE TO NEAREST FOOT _____ (+ OR -) IN ZONES V AND V1-V30 ONLY DOES BASE FLOOD ELEVATION INCLUDE EFFECTS OF WAVE ACTION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING FLOOD-PROOFED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (SEE FLOOD INSURANCE MANUAL FOR CERTIFICATION FORM.) ELEVATION CERTIFICATION DATE _____																																									
	COVERAGE REQUESTED—CHECK ONE BLOCK: <input type="checkbox"/> BUILDING AND CONTENTS <input type="checkbox"/> BUILDING ONLY <input type="checkbox"/> CONTENTS ONLY																																									
CONTENTS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th rowspan="2">COVERAGE</th> <th colspan="3">BASIC LIMITS</th> <th colspan="3">ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th> <th rowspan="2">DEDUCTIBLE</th> <th rowspan="2">BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE</th> <th rowspan="2">TOTAL PREMIUM</th> </tr> <tr> <th>AMOUNT OF INSURANCE</th> <th>RATE</th> <th>ANNUAL PREMIUM</th> <th>AMOUNT OF INSURANCE</th> <th>RATE</th> <th>ANNUAL PREMIUM</th> </tr> <tr> <td>BUILDING</td> <td></td> <td></td> <td>.00</td> <td></td> <td></td> <td>.00</td> <td>.00</td> <td></td> <td>.00</td> </tr> <tr> <td>CONTENTS</td> <td></td> <td></td> <td>.00</td> <td></td> <td></td> <td>.00</td> <td>.00</td> <td></td> <td>.00</td> </tr> </table>						COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	BUILDING			.00			.00	.00		.00	CONTENTS			.00			.00	.00		.00
	COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM																																
AMOUNT OF INSURANCE		RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM																																				
BUILDING			.00			.00	.00		.00																																	
CONTENTS			.00			.00	.00		.00																																	
CONSTRUCTION DATA	RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK FACTOR RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING																																									
	PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____																																									
CONSTRUCTION DATA	THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, & 4.																																									
	SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____ (OVER)																																									
COVERAGE AND RATING	ANNUAL SUBTOTAL \$ _____ ICC PREMIUM _____ SUBTOTAL _____ CRS PREMIUM DISCOUNT _____ % SUBTOTAL _____ PROBATION SURCHARGE + _____ FEDERAL POLICY FEE + _____ TOTAL PREPAID AMOUNT \$ _____																																									
	SIGNATURE _____																																									

FEMA Form 81-16, JUL 03

PLEASE ATTACH TO NFP COPY OF APPLICATION THE CHECK OR MONEY ORDER FOR THE TOTAL PREPAID PREMIUM MADE PAYABLE TO THE NATIONAL FLOOD INSURANCE PROGRAM

F-050 (1/04)

IMPORTANT — COMPLETE PART 1 AND, IF REQUIRED, PART 2 (ON LAST PAGE) BEFORE SENDING APPLICATION TO THE NFP — IMPORTANT

RATING

This section contains information, including rate tables, required to accurately rate a flood insurance policy. Information and rates for the Preferred Risk Policy (PRP) and Residential Condominium Building Association Policy (RCBAP) are found in their respective sections.

The detailed drawings, and accompanying text and tables, in the Lowest Floor Guide section are to be used as a guide for identifying the lowest floor for rating buildings. This guide will assist in developing the proper rate for the building.

Examples of some rating situations are shown on pages RATE 47 through RATE 55.

A premium table for single family Pre-FIRM buildings located in Special Flood Hazard Areas (SFHAs) is located on page RATE 11. These premiums were calculated using Rate Table 2. This premium table is included in this manual to help the agent more easily quote premiums for buildings that do not require elevation certification.

I. AMOUNT OF INSURANCE AVAILABLE

BUILDING COVERAGE	EMERGENCY PROGRAM	REGULAR PROGRAM			
		Basic Insurance Limits	Additional Insurance Limits	Total Insurance Limits	
	Single Family Dwelling	\$ 35,000 *	\$ 50,000	\$200,000	\$250,000
	2-4 Family Dwelling	\$ 35,000 *	\$ 50,000	\$200,000	\$250,000
	Other Residential	\$100,000**	\$150,000	\$100,000	\$250,000
Non-Residential	\$100,000**	\$150,000	\$350,000	\$500,000	
CONTENTS COVERAGE					
Residential	\$ 10,000	\$ 20,000	\$ 80,000	\$100,000	
Non-Residential	\$100,000	\$130,000	\$370,000	\$500,000	

* In Alaska, Guam, Hawaii, and U.S. Virgin Islands, the amount available is \$50,000.

** In Alaska, Guam, Hawaii, and U.S. Virgin Islands, the amount available is \$150,000.

NOTE: For RCBAP, refer to CONDO Section for basic insurance limits and maximum coverage available.

II. RATE TABLES

Rate tables are provided for the Emergency Program and for the Regular Program according to Pre-FIRM, Post-FIRM, and zone classifications. Tables 1-5 show annual rates per

\$100 of coverage. Table 6 provides precalculated Pre-FIRM premiums for various coverage limits. See Table 7 for Federal Policy Fee and Probation Surcharge.

TABLE 1. EMERGENCY PROGRAM RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

	Building	Contents
Residential	.76	.96
Non-Residential	.83	1.62

TABLE 2. REGULAR PROGRAM -- PRE-FIRM CONSTRUCTION RATES¹
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

FIRM ZONES A, AE, A1-A30, AO, AH, D

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
BUILDING TYPE		Building	Contents	Building	Contents	Building	Contents	Building	Contents
		No Basement/Enclosure	.76 / .34	.96 / .60	.76 / .34		.76 / .70	.83 / .60	
	With Basement	.81 / .50	.96 / .50	.81 / .50		.76 / .58		.88 / .58	
	With Enclosure	.81 / .60	.96 / .60	.81 / .60		.81 / .74		.88 / .74	
	Manufactured (Mobile) Home ²	.76 / .34	.96 / .60					.83 / .60	
CONTENTS LOCATION	Basement & Above				.96 / .50		.96 / .50		1.62 / 1.00
	Enclosure & Above				.96 / .60		.96 / .60		1.62 / 1.20
	Lowest Floor Only - Above Ground Level				.96 / .60		.96 / .60		1.62 / .51
	Lowest Floor Above Ground Level and Higher Floors				.96 / .41		.96 / .41		1.62 / .51
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.24 / .12
	Manufactured (Mobile) Home ²								1.62 / .51

FIRM ZONES V, VE, V1-V30

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
BUILDING TYPE		Building	Contents	Building	Contents	Building	Contents	Building	Contents
		No Basement/Enclosure	.99 / .88	1.23 / 1.58	.99 / .88		.99 / 1.66	1.10 / 1.66	
	With Basement	1.06 / 1.34	1.23 / 1.33	1.06 / 1.34		1.06 / 2.49		1.16 / 2.49	
	With Enclosure	1.06 / 1.58	1.23 / 1.58	1.06 / 1.58		1.06 / 2.79		1.16 / 2.79	
	Manufactured (Mobile) Home ²	.99 / 4.18	1.23 / 1.58					1.10 / 7.03	
CONTENTS LOCATION	Basement & Above				1.23 / 1.33		1.23 / 1.33		2.14 / 2.95
	Enclosure & Above				1.23 / 1.58		1.23 / 1.58		2.14 / 3.21
	Lowest Floor Only - Above Ground Level				1.23 / 1.58		1.23 / 1.58		2.14 / 2.67
	Lowest Floor Above Ground Level and Higher Floors				1.23 / 1.39		1.23 / 1.39		2.14 / 2.28
	Above Ground Level - More than One Full Floor				.47 / .29		.47 / .29		.45 / .39
	Manufactured (Mobile) Home ²								2.14 / 6.53

FIRM ZONES A99, B, C, X

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
BUILDING TYPE		Building	Contents	Building	Contents	Building	Contents	Building	Contents
		No Basement/Enclosure	.58 / .14	.94 / .25	.58 / .14		.52 / .14	.52 / .14	
	With Basement	.66 / .20	1.07 / .35	.66 / .20		.71 / .20		.71 / .20	
	With Enclosure	.66 / .22	1.07 / .38	.66 / .22		.71 / .22		.71 / .22	
	Manufactured (Mobile) Home ²	.58 / .31	.94 / .25					.71 / .29	
CONTENTS LOCATION	Basement & Above				1.26 / .46		1.26 / .46		1.30 / .50
	Enclosure & Above				1.26 / .51		1.26 / .51		1.30 / .47
	Lowest Floor Only - Above Ground Level				.94 / .48		.94 / .48		.73 / .29
	Lowest Floor Above Ground Level and Higher Floors				.94 / .25		.94 / .25		.73 / .25
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.22 / .12
	Manufactured (Mobile) Home ²								.61 / .39

¹ Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM). If FIRM Zone is unknown, use rates for Zones A, AE, A1-A30, AO, AH, D.

² The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

TABLE 3A. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

FIRM ZONES A99, B, C, X

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
		Building	Contents	Building	Contents	Building	Contents	Building	Contents
BUILDING TYPE	No Basement/Enclosure	.58 / .14	.94 / .25	.58 / .14		.52 / .14		.52 / .14	
	With Basement	.66 / .20	1.07 / .35	.66 / .20		.71 / .20		.71 / .20	
	With Enclosure	.66 / .22	1.07 / .38	.66 / .22		.71 / .22		.71 / .22	
	Manufactured (Mobile) Home ¹	.58 / .31	.94 / .25					.71 / .29	
CONTENTS LOCATION	Basement & Above				1.26 / .46		1.26 / .46		1.30 / .50
	Enclosure & Above				1.26 / .51		1.26 / .51		1.30 / .47
	Lowest Floor Only - Above Ground Level				.94 / .48		.94 / .48		.73 / .29
	Lowest Floor Above Ground Level and Higher Floors				.94 / .25		.94 / .25		.73 / .25
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.22 / .12
	Manufactured (Mobile) Home ¹								.61 / .39

FIRM ZONE D

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
		Building	Contents	Building	Contents	Building	Contents	Building	Contents
BUILDING TYPE	No Basement/Enclosure	.76 / .32	.96 / .57	.76 / .32		.83 / .57		.83 / .57	
	With Basement	***	***	***		***		***	
	With Enclosure	***	***	***		***		***	
	Manufactured (Mobile) Home ¹	1.00 / .62	1.09 / .66					1.88 / .77	
CONTENTS LOCATION	Basement & Above				***		***		***
	Enclosure & Above				***		***		***
	Lowest Floor Only - Above Ground Level				.96 / .57		.96 / .57		1.62 / .52
	Lowest Floor Above Ground Level and Higher Floors				.96 / .39		.96 / .39		1.62 / .49
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.24 / .12
	Manufactured (Mobile) Home ¹								1.62 / .52

FIRM ZONES AO, AH ("No Basement" Buildings Only)²

OCCUPANCY	Building		Contents	
	1-4 Family	Other Res & Non-Res	Residential	Non-Residential
With Certification of Compliance ³ (AOB, AHB)	.25 / .06	.21 / .06	.34 / .11	.21 / .11
Without Certification of Compliance or Elevation Certificate ⁴	.77 / .17	.84 / .30	.97 / .20	1.63 / .25

¹ The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

² Zones AO, AH Buildings With Basement/Enclosure: Submit for Rating

³ "With Certification" rates are to be used when the Elevation Certificate shows that the lowest floor is equal to or greater than the community's elevation requirement.

⁴ "Without Certification" rates are to be used only on Post-FIRM structures without an Elevation Certificate or when the Elevation Certificate shows that the lowest floor elevation of a Post-FIRM structure is less than the community's elevation requirement.

*** SUBMIT FOR RATING

TABLE 3B. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

FIRM ZONES AE, A1-A30 -- BUILDING RATES

Elevation of Lowest Floor Above or Below BFE ¹	One Floor, No Basement/Encl		More than One Floor, No Basement/Encl		More than One Floor, With Basement/Encl		Manufactured (Mobile) Home ²	
	1-4 Family	Other Residential & Non-Residential	1-4 Family	Other Residential & Non-Residential	1-4 Family	Other Residential & Non-Residential	Single Family	Non-Residential
+4	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08
+3	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.25 / .08	.22 / .08
+2	.32 / .08	.26 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.31 / .08	.25 / .08
+1	.59 / .08	.45 / .10	.38 / .08	.28 / .08	.29 / .08	.22 / .08	.66 / .09	.72 / .08
0	.98 / .08	.88 / .20	.70 / .08	.54 / .16	.51 / .08	.45 / .16	1.52 / .09	1.47 / .08
-1 ³	2.40 / .95	3.48 / 1.29	2.17 / .86	2.80 / .69	1.19 / .49	1.33 / .70	***	***
-2	***	***	***	***	***	***	***	***

FIRM ZONES AE, A1-A30 -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE ¹	Lowest Floor Only -- Above Ground Level (No Basement/Encl.)		Lowest Floor Above Ground Level & Higher Floors (No Basement/Encl.)		More than One Floor With Basement/Enclosure		Manufactured (Mobile) Home ²	
	Residential	Non-Residential	Residential	Non-Residential	Residential	Non-Residential	Single Family	Non-Residential
+4	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12
+3	.38 / .12	.23 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12
+2	.38 / .12	.24 / .12	.38 / .12	.24 / .12	.38 / .12	.22 / .12	.38 / .12	.31 / .14
+1	.59 / .12	.33 / .18	.41 / .12	.28 / .12	.38 / .12	.22 / .12	.59 / .12	.48 / .20
0	1.10 / .12	.68 / .45	.72 / .12	.48 / .27	.40 / .12	.29 / .12	1.21 / .12	1.01 / .64
-1 ³	3.01 / .75	1.94 / 1.26	1.78 / .58	1.37 / .77	.48 / .12	1.06 / .12	***	***
-2	***	***	***	***	***	***	***	***

FIRM ZONES AE, A1-A30 -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE ¹	Above Ground Level More than One Full Floor			
	Single Family	2-4 Family	Other Residential	Non-Residential
+4		.35 / .12	.35 / .12	.22 / .12
+3		.35 / .12	.35 / .12	.22 / .12
+2		.35 / .12	.35 / .12	.22 / .12
+1		.35 / .12	.35 / .12	.22 / .12
0		.35 / .12	.35 / .12	.22 / .12
-1		.35 / .12	.35 / .12	.22 / .12
-2		.35 / .12	.37 / .12	.24 / .12

¹ If Lowest Floor is -1 because of attached garage, submit application for special consideration. Rate may be lower.

² The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

³ Use Submit-for-Rate guidelines if the enclosure below the lowest elevated floor of an elevated building or if the crawl space (under-floor space) that has its interior floor within 2 feet below grade on all sides, which is used for rating, is 1 or more feet below BFE.

***** SUBMIT FOR RATING**

TABLE 3C. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

UNNUMBERED ZONE A -- WITHOUT BASEMENT/ENCLOSURE¹

Elevation Difference to nearest foot	BUILDING RATES		CONTENTS RATES		TYPE OF ELEVATION CERTIFICATE
	Occupancy		Occupancy		
	1-4 Family	Other & Non- Residential	Residential ²	Non- Residential ²	
+5 or more	.36 / .10	.48 / .15	.62 / .12	.65 / .12	NO ESTIMATED BASE FLOOD ELEVATION ³
+2 to +4	.75 / .12	.78 / .20	.82 / .17	.89 / .23	
+1	1.42 / .56	1.60 / .75	1.40 / .63	1.33 / .72	
0 or below	***	***	***	***	
+2 or more	.32 / .08	.34 / .09	.50 / .12	.49 / .12	WITH THE ESTIMATED BASE FLOOD ELEVATION ⁴
0 to +1	.70 / .10	.61 / .17	.72 / .15	.76 / .21	
-1	2.24 / .88	2.88 / 1.02	2.08 / .67	1.84 / 1.02	
-2 or below	***	***	***	***	
No Elevation Certificate	2.67 / 1.15	3.60 / 1.70	2.61 / 1.00	2.74 / 1.35	No Elevation Certificate

¹ Zone A building with basement (including crawl space below grade on all sides) or enclosure -- Submit for Rating.

² For elevation rated risks other than Single Family, when contents are located one floor or more above lowest floor used for rating -- use .35 / .12.

³ Elevation difference is the measured distance between the highest adjacent grade next to the building and the lowest floor of the building.

⁴ Elevation difference is the measured distance between the estimated BFE provided by the community or registered professional engineer, surveyor, or architect and the lowest floor of the building.

*** **SUBMIT FOR RATING**

TABLE 3D. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

FIRM ZONES '75-81, V1-V30, VE -- BUILDING RATES¹

Elevation of Lowest Floor Above or Below BFE	One Floor, No Basement/Encl		More than One Floor, No Basement/Encl		More than One Floor, With Basement/Encl		Manufactured (Mobile) Home ²	
	1-4 Family	Other Residential & Non-Residential	1-4 Family	Other Residential & Non-Residential	1-4 Family	Other Residential & Non-Residential	Single Family	Non-Residential
0 ³	1.90 / .34	2.30 / .89	1.53 / .34	1.66 / .83	1.33 / .34	1.49 / .67	2.84 / .28	4.07 / .25
-1 ⁴	4.06 / 2.08	6.05 / 3.33	3.72 / 2.08	5.22 / 2.53	2.63 / 1.88	2.75 / 2.57	***	***
-2	***	***	***	***	***	***	***	***

FIRM ZONES '75-81, V1-V30, VE -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE	Lowest Floor Only -- Above Ground Level (No Basement/Encl.)		Lowest Floor Above Ground Level & Higher Floors (No Basement/Encl.)		More than One Floor With Basement/Enclosure		Manufactured (Mobile) Home ²	
	Residential	Non-Residential	Residential	Non-Residential	Residential	Non-Residential	Single Family	Non-Residential
0 ³	2.94 / .41	2.60 / 1.91	1.92 / .45	1.82 / 1.13	1.08 / .50	1.08 / .50	2.83 / .45	2.95 / 2.43
-1 ⁴	6.47 / 3.14	6.35 / 5.53	3.82 / 2.43	4.35 / 3.45	1.27 / .50	3.88 / .50	***	***
-2	***	***	***	***	***	***	***	***

FIRM ZONES '75-81, V1-V30, VE -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE	Above Ground Level More than One Full Floor			
	Single Family	2-4 Family	Other Residential	Non-Residential
0 ³		.55 / .25	.55 / .25	.42 / .25
-1 ⁴		.55 / .25	.55 / .25	.42 / .25
-2		.55 / .25	.55 / .25	.46 / .25

¹ Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

² The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

³ These rates are to be used if the lowest floor of the building is at or above BFE.

⁴ Use Submit-for-Rate guidelines if the enclosure below the lowest elevated floor of an elevated building, which is used for rating, is 1 or more feet below BFE.

*** **SUBMIT FOR RATING**

FIRM ZONES '75-'81, UNNUMBERED V ZONE

SUBMIT FOR RATING

TABLE 3E. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE

1981 POST-FIRM V1-V30, VE ZONE RATES¹

Elevation of the lowest floor above or below BFE adjusted for wave height ²	Elevated Buildings Free of Obstruction³				
	Contents		Building		
	Residential	Non-Residential	Replacement Cost Ratio .75 or More ⁴	Replacement Cost Ratio .50 to .74 ⁴	Replacement Cost Ratio Under .50 ⁴
+4 or more	.30	.30	.50	.67	1.00
+3	.30	.30	.60	.80	1.20
+2	.42	.44	.75	1.00	1.50
+1	.73	.78	1.08	1.44	2.02
0	1.12	1.20	1.39	1.86	2.61
-1	1.62	1.68	1.83	2.42	3.14
-2	2.26	2.38	2.41	3.16	4.03
-3	3.10	3.30	3.10	4.15	5.26
-4 or below	***	***	***	***	***

¹ Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

² Wave height adjustment is not required in those cases where the Flood Insurance Rate Map indicates that the map includes wave height.

³ Free of Obstruction -- The space below the lowest floor must be completely free of obstructions or any attachment to the building or may have:
 (1) Insect screening (provided that no additional supports are required for the screening), or
 (2) Open wood constructed lattice "breakaway walls" (at least 40 percent of the lattice construction must be open).
 These walls must be designed and installed to collapse under stress without jeopardizing the structural support of the building so that the impact on the building of abnormally high tides or wind driven water is minimized.

⁴ These percentages represent building replacement cost ratios, which are determined by dividing the amount of building coverage being purchased by the replacement cost. See page RATE 20 for more details.

*** **SUBMIT FOR RATING**

1981 POST-FIRM V1-V30, VE ZONE
Non-Elevated Buildings

SUBMIT FOR RATING

1981 POST-FIRM UNNUMBERED V ZONE

SUBMIT FOR RATING

TABLE 3F. REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES
ANNUAL RATES PER \$100 OF COVERAGE

1981 POST-FIRM V1-V30, VE ZONE RATES^{1,2}

Elevation of the lowest floor above or below BFE adjusted for wave height ³	Elevated Buildings With Obstruction⁴				
	Contents		Building		
	Residential	Non-Residential	Replacement Cost Ratio .75 or More ⁵	Replacement Cost Ratio .50 to .74 ⁵	Replacement Cost Ratio Under .50 ⁵
+4 or more	.40	.40	1.10	1.48	2.20
+3	.40	.40	1.22	1.61	2.45
+2	.50	.50	1.38	1.80	2.75
+1	.85	.90	1.60	2.15	3.10
0	1.21	1.28	1.88	2.58	3.50
-1 ⁶	1.68	1.78	2.24	2.97	4.00
-2 ⁶	2.33	2.48	2.79	3.66	4.75
-3 ⁶	3.18	3.38	3.58	4.66	6.00
-4 or below	***	***	***	***	***

¹ Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

² Rates provided are only for elevated buildings. Use the *Specific Rating Guidelines* document for non-elevated buildings.

³ Wave height adjustment is not required in those cases where the Flood Insurance Rate Map indicates that the map includes wave height.

⁴ With Obstruction -- The space below has an area of less than 300 square feet with breakaway solid walls or contains equipment below the BFE. If the space below has an area of 300 square feet or more or if any portion of the space below the elevated floor is enclosed with non-breakaway walls, submit for rating.

⁵ These percentages represent building replacement cost ratios, which are determined by dividing the amount of building coverage being purchased by the replacement cost. See page RATE 20 for more details.

⁶ For buildings with obstruction, use Submit-for-Rate guidelines if the enclosure below the lowest elevated floor of an elevated building, which is used for rating, is one or more feet below BFE.

*** **SUBMIT FOR RATING**

1981 POST-FIRM UNNUMBERED V ZONE

SUBMIT FOR RATING

TABLE 4. REGULAR PROGRAM -- FIRM ZONE AR AND AR DUAL ZONES RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

PRE-FIRM NOT ELEVATION-RATED RATES^{1, 2}

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
		Building	Contents	Building	Contents	Building	Contents	Building	Contents
BUILDING TYPE	No Basement/Enclosure	.58 / .14	.94 / .25	.58 / .14		.52 / .14		.52 / .14	
	With Basement	.66 / .20	1.07 / .35	.66 / .20		.71 / .20		.71 / .20	
	With Enclosure	.66 / .22	1.07 / .38	.66 / .22		.71 / .22		.71 / .22	
	Manufactured (Mobile) Home ³	.58 / .31	.94 / .25					.71 / .29	
CONTENTS LOCATION	Basement & Above				1.26 / .46		1.26 / .46		1.30 / .50
	Enclosure & Above				1.26 / .51		1.26 / .51		1.30 / .47
	Lowest Floor Only - Above Ground Level				.94 / .48		.94 / .48		.73 / .29
	Lowest Floor Above Ground Level and Higher Floors				.94 / .25		.94 / .25		.73 / .25
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.22 / .12
	Manufactured (Mobile) Home ³								.61 / .39

¹ Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM).

² Base Deductible is \$1,000.

³ The definition of Manufactured (Mobile) Home includes travel trailers. See Page APP 3.

POST-FIRM NOT ELEVATION-RATED RATES¹

OCCUPANCY		Single Family		2-4 Family		Other Residential		Non-Residential	
		Building	Contents	Building	Contents	Building	Contents	Building	Contents
BUILDING TYPE	No Basement/Enclosure	.58 / .14	.94 / .25	.58 / .14		.52 / .14		.52 / .14	
	With Basement	.66 / .20	1.07 / .35	.66 / .20		.71 / .20		.71 / .20	
	With Enclosure	.66 / .22	1.07 / .38	.66 / .22		.71 / .22		.71 / .22	
	Manufactured (Mobile) Home ²	.58 / .31	.94 / .25					.71 / .29	
CONTENTS LOCATION	Basement & Above				1.26 / .46		1.26 / .46		1.30 / .50
	Enclosure & Above				1.26 / .51		1.26 / .51		1.30 / .47
	Lowest Floor Only - Above Ground Level				.94 / .48		.94 / .48		.73 / .29
	Lowest Floor Above Ground Level and Higher Floors				.94 / .25		.94 / .25		.73 / .25
	Above Ground Level - More than One Full Floor				.35 / .12		.35 / .12		.22 / .12
	Manufactured (Mobile) Home ²								.61 / .39

¹ Base Deductible is \$500.

² The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

**TABLE 5. REGULAR PROGRAM -- PRE-FIRM AND POST-FIRM
ELEVATION-RATED RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)**

FIRM ZONES AR and AR Dual Zones -- BUILDING RATES

Elevation of Lowest Floor Above or Below BFE	One Floor, No Basement/Encl		More than One Floor, No Basement/Encl		More than One Floor, With Basement/Encl		Manufactured (Mobile) Home ¹	
	1-4 Family	Other Residential & Non- Residential	1-4 Family	Other Residential & Non- Residential	1-4 Family	Other Residential & Non- Residential	Single Family	Non- Residential
+4	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08
+3	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.25 / .08	.22 / .08
+2	.32 / .08	.26 / .08	.24 / .08	.20 / .08	.24 / .08	.20 / .08	.31 / .08	.25 / .08
+1	.58 / .08	.45 / .10	.38 / .08	.28 / .08	.29 / .08	.22 / .08	.58 / .11	.71 / .08
0	.58 / .14	.52 / .14	.70 / .08	.52 / .14	.51 / .08	.45 / .16	.58 / .31	.71 / .29
-1 ²	See Footnote ²							

FIRM ZONES AR and AR Dual Zones -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE	Lowest Floor Only -- Above Ground Level (No Basement/Encl.)		Lowest Floor Above Ground Level & Higher Floors (No Basement/Encl.)		More than One Floor With Basement/Enclosure		Manufactured (Mobile) Home ¹	
	Residential	Non- Residential	Residential	Non- Residential	Residential	Non- Residential	Single Family	Non- Residential
+4	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12
+3	.38 / .12	.23 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12	.38 / .12	.22 / .12
+2	.38 / .12	.24 / .12	.38 / .12	.24 / .12	.38 / .12	.22 / .12	.38 / .12	.31 / .14
+1	.59 / .12	.33 / .18	.41 / .12	.28 / .12	.38 / .12	.22 / .12	.59 / .12	.48 / .20
0	1.10 / .12	.73 / .29	.72 / .12	.48 / .27	.40 / .12	.29 / .12	.94 / .25	.61 / .39
-1 ²	See Footnote ²							

FIRM ZONES AR and AR Dual Zones -- CONTENTS RATES

Elevation of Lowest Floor Above or Below BFE	Above Ground Level More than One Full Floor			
	Single Family	2-4 Family	Other Residential	Non-Residential
+4		.35 / .12	.35 / .12	.22 / .12
+3		.35 / .12	.35 / .12	.22 / .12
+2		.35 / .12	.35 / .12	.22 / .12
+1		.35 / .12	.35 / .12	.22 / .12
0		.35 / .12	.35 / .12	.22 / .12
-1 ³		.35 / .12	.35 / .12	.22 / .12
-2 ³		.35 / .12	.35 / .12	.22 / .12

¹ The definition of Manufactured (Mobile) Home includes travel trailers. See page APP 3.

² Use Table 4 Pre-FIRM and Post-FIRM Not Elevation-Rated AR and AR Dual Zones Rate Table.

³ These rates are only applicable to Contents-only policies.

TABLE 6.
PRECALCULATED PRE-FIRM PREMIUM TABLE

AMOUNT OF INSURANCE	PREMIUM ¹ EXCLUDING ICC ² AND FEDERAL POLICY FEE ³			
	A, AE, A1-A30, AH, D		V, VE, V1-V30	
	w/bsmt	w/o bsmt	w/bsmt	w/o bsmt
BUILDING				
\$ 20,000	\$ 162	\$ 152	\$ 212	\$ 198
\$ 30,000	\$ 243	\$ 228	\$ 318	\$ 297
\$ 40,000	\$ 324	\$ 304	\$ 424	\$ 396
\$ 50,000	\$ 405	\$ 380	\$ 530	\$ 495
\$ 60,000	\$ 455	\$ 414	\$ 664	\$ 583
\$ 70,000	\$ 505	\$ 448	\$ 798	\$ 671
\$ 80,000	\$ 555	\$ 482	\$ 932	\$ 759
\$ 90,000	\$ 605	\$ 516	\$1,066	\$ 847
\$100,000	\$ 655	\$ 550	\$1,200	\$ 935
\$125,000	\$ 780	\$ 635	\$1,535	\$1,155
\$150,000	\$ 905	\$ 720	\$1,870	\$1,375
\$175,000	\$1,030	\$ 805	\$2,205	\$1,595
\$200,000	\$1,155	\$ 890	\$2,540	\$1,815
\$225,000	\$1,280	\$ 975	\$2,875	\$2,035
\$250,000 ⁴	\$1,405	\$1,060	\$3,210	\$2,255
CONTENTS				
\$ 5,000	\$ 48	\$ 48	\$ 62	\$ 62
\$ 10,000	\$ 96	\$ 96	\$ 123	\$ 123
\$ 15,000	\$144	\$144	\$ 185	\$ 185
\$ 20,000	\$192	\$192	\$ 246	\$ 246
\$ 25,000	\$217	\$222	\$ 313	\$ 325
\$ 30,000	\$242	\$252	\$ 379	\$ 404
\$ 40,000	\$292	\$312	\$ 512	\$ 562
\$ 50,000	\$342	\$372	\$ 645	\$ 720
\$ 60,000	\$392	\$432	\$ 778	\$ 878
\$ 70,000	\$442	\$492	\$ 911	\$1,036
\$ 80,000	\$492	\$552	\$1,044	\$1,194
\$ 90,000	\$542	\$612	\$1,177	\$1,352
\$100,000	\$592	\$672	\$1,310	\$1,510

¹ Premium before applying any CRS credits or optional deductible factors.

² For building coverage amounts of \$240,000 and less, add \$75 to the building premium selected from the table above to cover ICC cost, except for D zones. For D zones add \$6. For building coverage amounts above \$240,000, see Footnote 4 below.

³ Add \$30 to the premium selected from the table above to cover Federal Policy Fee.

⁴ Add \$60 to cover the ICC cost for the \$250,000 building limit, except for D zones. For D zones add \$4.

TABLE 7. FEDERAL POLICY FEE AND PROBATION SURCHARGE TABLE

FEDERAL POLICY FEE ¹	PROBATION SURCHARGE
\$30	\$50

¹ For the Preferred Risk Policy, the Federal Policy Fee is \$11.00.

III. DEDUCTIBLES

A standard \$500 deductible applies in all non-SFHA zones. The insured may choose a deductible amount different from the standard \$500 for Post-FIRM or the standard \$1000 for structures in the Emergency Program and those rated using Pre-FIRM rates in Zones A, AO, AH, A1-A30, AE, VO, V1-V30, VE, V, AR, and AR Dual Zones (AR/AE, AR/AH, AR/AO, AR/A1-A30, AR/A). The optional deductible amount may be applied to policies insuring properties in either Emergency Program or Regular Program communities. Refer to page CONDO 22 for Residential Condominium Building Association Policy optional deductibles.

A. Buy-Back Deductibles

Policyholders who wish to reduce their deductibles from the standard deductibles of \$1,000 for Pre-FIRM SFHA risks may opt to

purchase separate \$500 deductibles for building and contents coverages, for an additional premium. The deductible factors provided on pages RATE 13 and CONDO 22 must be used to calculate the deductible surcharge.

B. Changes in Deductible Amount

The amount of the deductible may be increased during the policy term by submitting a completed General Change Endorsement form. The deductible amount may be reduced through the submission of a new Application at the time of renewal. This procedure does not require the completion of the entire Flood Insurance Application. Deductibles cannot be reduced mid-term unless required by the mortgagee and written authorization is provided by the mortgagee. A 30-day waiting period will be applied to reduce the deductible.

TABLE 8. DEDUCTIBLE FACTORS

Single Family and 2-4 Family Building and Contents Policies^{1,2}

Deductible Options: Building/Contents	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.	Deductible Options: Building/Contents	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.
\$ 500/ \$500	1.000	1.100	\$4,000/\$1,000	.835	.850
\$1,000/ \$500	.975	1.050	\$4,000/\$2,000	.810	.825
\$1,000/\$1,000	.960	1.000	\$4,000/\$3,000	.785	.800
\$2,000/ \$500	.930	1.000	\$4,000/\$4,000	.765	.775
\$2,000/\$1,000	.915	.950	\$5,000/ \$500	.810	.875
\$2,000/\$2,000	.890	.925	\$5,000/\$1,000	.800	.825
\$3,000/ \$500	.890	.950	\$5,000/\$2,000	.785	.800
\$3,000/\$1,000	.875	.900	\$5,000/\$3,000	.770	.780
\$3,000/\$2,000	.850	.875	\$5,000/\$4,000	.755	.765
\$3,000/\$3,000	.825	.850	\$5,000/\$5,000	.740	.750
\$4,000/ \$500	.850	.900			

Single Family and 2-4 Family Building Only or Contents Only Policies^{1,2}

Building	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.
\$500	1.000	1.100
\$1,000	.960	1.000
\$2,000	.900	.935
\$3,000	.850	.885
\$4,000	.800	.835
\$5,000	.750	.785

Contents ³	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.
\$500	1.000	1.150
\$1,000	.950	1.000
\$2,000	.850	.900
\$3,000	.775	.825
\$4,000	.700	.750
\$5,000	.650	.675

Other Residential and Non-Residential Policies^{1,2,4}

Bldg./Contents	Discount From		Amount	Building Only		Contents Only	
	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.		Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.	Post-FIRM \$500 Ded.	Pre-FIRM \$1,000 Ded.
\$500/ \$500	1.000	1.050	\$500	1.000	1.050	1.000	1.050
\$1,000/\$1,000	.980	1.000	\$1,000	.975	1.000	.980	1.000
\$2,000/\$2,000	.940	.960	\$2,000	.940	.960	.950	.965
\$3,000/\$3,000	.910	.930	\$3,000	.910	.925	.925	.940
\$4,000/\$4,000	.885	.910	\$4,000	.880	.900	.900	.915
\$5,000/\$5,000	.870	.890	\$5,000	.850	.875	.875	.890
\$10,000/\$10,000 ⁴	.775	.800	\$10,000	.750	.760	.775	.800
\$15,000/\$15,000 ⁴	.725	.750	\$15,000	.675	.685	.700	.725
\$20,000/\$20,000 ⁴	.675	.700	\$20,000	.600	.610	.650	.660
\$25,000/\$25,000 ⁴	.625	.650	\$25,000	.550	.560	.600	.610
\$50,000/\$50,000 ⁴	.500	.525	\$50,000	.450	.460	.525	.535

¹ Deductible factors for the RCBAP are located on page CONDO 22.

² The ICC premium is not eligible for the deductible discount. First calculate the deductible discount, then add in the ICC premium, for each policy year.

³ Also applies to residential unit contents in Other Residential building or in multi-unit condominium building.

⁴ Deductibles of \$10,000 to \$50,000 are available only for Non-Residential Policies.

IV. INCREASED COST OF COMPLIANCE (ICC) COVERAGE

Coverage is afforded under the Standard Flood Insurance Policy for the increased cost to rebuild, or otherwise alter, a flood-damaged structure to bring it into conformance with State or local floodplain management ordinances or laws.

ICC coverage is mandatory for all Standard Flood Insurance Policies except for (1) those sold in Emergency Program communities, (2) contents-only policies, (3) Dwelling Forms on individual condominium units, and (4) Group Flood Insurance. For these four cases, ICC

coverage is not available. In a condominium building, ICC coverage is only available through the Condominium Association's flood policy.

The current ICC coverage limit is \$30,000 per building or, for non-condominium townhouse construction, per unit, per policy. This coverage amount is in addition to the Building Amount of insurance purchased. However, for any one flood event, the amount of combined loss payment received from Building coverage and ICC coverage cannot exceed the maximum program limits of \$250,000 for residential structures and \$500,000 for non-residential structures.

**TABLE 9. STANDARD FLOOD INSURANCE POLICY
INCREASED COST OF COMPLIANCE (ICC) COVERAGE
Premiums for \$30,000 ICC Coverage**

All Except RCBAP, MPPP, Preferred Risk Policies, and Submit-For-Rate Policies

FIRM	Zone	Residential		Non-Residential	
		Building Amount of Insurance		Building Amount of Insurance	
		\$1 - \$240,000	\$240,001 - \$250,000	\$1 - \$490,000	\$490,001 - \$500,000
Post-FIRM	A, AE, A1-A30, AO, AH	\$ 6	\$ 4	\$ 6	\$ 4
	AR, AR DUAL ZONES	\$ 6	\$ 4	\$ 6	\$ 4
	POST-81 V1-V30, VE	\$20	\$14	\$20	\$14
	'75-'81 V1-V30, VE	\$35	\$25	\$35	\$25
	A99, B, C, X, D	\$ 6	\$ 4	\$ 6	\$ 4
Pre-FIRM	A, AE, A1-A30, AO, AH	\$75	\$60	\$75	\$60
	AR, AR DUAL ZONES	\$ 6	\$ 4	\$ 6	\$ 4
	V, VE, V1-V30	\$75	\$60	\$75	\$60
	A99, B, C, X, D	\$ 6	\$ 4	\$ 6	\$ 4

- NOTES:** (1) ICC coverage does not apply to the Emergency Program, individually owned condominium units insured under the Dwelling Form or General Property Form, contents-only policies, and Group Flood Insurance Policies.
- (2) **The ICC premium is not eligible for the deductible discount. First calculate the deductible discount, then add in the ICC premium.**
- (3) Use only one ICC premium amount listed above for each building to be insured.
- (4) For scheduled building policies, apply ICC premium for each building.
- (5) Add Federal Policy Fee and Probation Surcharge, if applicable, when computing the premium.
- (6) Elevation-rated Pre-FIRM buildings should use Post-FIRM ICC premiums.
- (7) See RATE 19 for AR Zone and AR Dual Zone Rating information.
- (8) For flood policies issued through the Mortgage Portfolio Protection Program, use the rates and ICC premiums in the table on page MPPP 1.

calculating the ratio. For example, if the building replacement cost is \$1,000,000 and the amount of building coverage requested is the maximum statutory building limit of \$250,000, the rate is .25, so use the rate listed for "Replacement Cost Ratio Under .50."

Place the rate in the appropriate box on the Application and continue with the premium calculation.

4. Elevation Information

The lowest floor elevation must be identified for buildings in Zones V, V1-V30, and VE. Note that the lowest floor elevation is measured at the *bottom* of the lowest floor beam or slab, whichever is appropriate.

The BFE, including wave height, must be identified for any building located in Zones V1-V30 and VE.

XIV. SPECIAL RATING SITUATIONS

A. Tentative Rates

Tentative rates are used to issue policies when producers fail to provide the required actuarial rating information. With tentative rates, a policy will be generated with coverage limits based on the actual premium received. Tentatively rated policies cannot be endorsed to increase coverage limits, or renewed for another policy term, until the required actuarial rating information and full premium payment are received.

Tentative rates are generally higher than the rates published in this manual (ranging from \$2 to \$10 per \$100 of coverage). When tentative rates are applied, a Declarations Page and a Tentative Rate Letter will be forwarded to the policyholder, producer, and mortgagee (if any), requesting the necessary information so that the proper rate can be determined.

If a loss occurs on a tentatively rated property, payment will be limited by the amount of coverage that the initially submitted premium will purchase using the correct actuarial rating information.

B. Alternative Rates

When a building is Pre-FIRM and the FIRM zone is unknown, an alternative rating procedure can be used only if the building is located in a community that does not have any V Zones. In

these cases, the NFIP will presume that the building is located in a Special Flood Hazard Area, and the FIRM zone should be shown as Zone AA. AA is not a valid flood zone designation; rather, it is a rating method used when the flood zone is unknown. The rates for FIRM Zone A for Pre-FIRM properties should then be used to compute the premium.

The alternative rating procedure is also used by the NFIP for renewal of policies in communities that have converted from the Emergency Program to the Regular Program during a policy's term. Again, this procedure can be used only when the community has no V Zones. In these cases, the NFIP assigns an AS Zone designation, which is not a valid flood zone designation, but rather a rating method, and uses the Pre-FIRM Zone A rates to compute the premium.

In both of the above situations, the producer should determine the actual FIRM zone and submit a General Change Endorsement to correct the FIRM zone and premium. All corrections should be made as soon as possible within the initial policy term after an AA or AS Zone designation has been made. If the correct flood zone is not provided, no Renewal Premium Notice will be issued.

C. Map "Grandfather" Rules--Effect of Map Revisions on Flood Insurance Rates

A community will occasionally make structural improvements (dams, levees, etc.) to reduce the potential effects of flooding; experience new development aggravating the flooding situation, thereby expanding the floodplain; revise geographical boundaries resulting in the designation of additional flood hazard areas; or provide information to better delineate the BFE and/or flood insurance risk zones. When these situations occur, the FIRM is revised and republished.

The implementation of a new FIRM raises the question--HOW DOES THE NEW MAP AFFECT FLOOD INSURANCE RATES?

1. Grandfather Rules

To recognize policyholders who have built in compliance with the FIRM and/or remained loyal customers of the NFIP by maintaining continuous coverage, the Federal Emergency Management Agency has "Grandfather rules." These rules allow such policyholders to benefit in the rating for that building. For such buildings, the insured would have the

option of using the current rating criteria for that property or having the premium rate determined by using the BFE and/or flood zone on the FIRM (old map) in effect when the building was originally constructed (for those built in compliance) or when coverage was first obtained (for those with continuous coverage). This results in a cost savings to insureds when the new map resulting from a map revision would result in a higher premium rate.

The conditions that must be met for an insured to be eligible to receive the rating benefit from the "Grandfather rules" after a map revision (new map) becomes effective are described below.

2. General Rule of Rating

Always use the new map if it will provide a more favorable premium (lower rate).

3. Existing Business--Renewal Policies

Policies written to cover either Post-FIRM or Pre-FIRM construction may be renewed and rated based on the FIRM and/or BFE in effect when the policy was initially rated as long as the coverage is continuous and the building has not been altered to make the reference level lower than the BFE on that FIRM. (NOTE: Alteration does not apply to Pre-FIRM construction or to risks grandfathered to a B, C, or X Zone.)

a. Examples-- Post-FIRM Construction

- A building was constructed in 1980. Coverage was purchased at the time of construction. The FIRM zone in effect was A1. The BFE was 10'. The Lowest Floor was 11'. The elevation difference was +1, and the policy was rated using a +1 elevation difference.

This policy was written and continuously renewed for 3 years. In 1983 a new map for the community was issued.

The property remained in an A1 Zone. However, the BFE became 12'. Because the lowest floor did not change, the elevation difference was -1. Since continuous coverage existed on the policy and the building was not altered in any way, the policy can be rated using a +1 elevation difference.

- A building was constructed in 1980. The FIRM zone in effect was A. In 1983 the map was revised, which placed the building in a VE zone. Since continuous coverage existed and the building was not altered, the policyholder can continue to use Zone A in determining the rate.

b. Example-- Pre-FIRM Construction

At the time flood insurance coverage was applied for, the building was located in Zone A99. A new map designated the zone as AE. The policy may continue to be rated using Zone A99 rates on the old map as long as there is no interruption in coverage.

4. New Business-- Applications for Coverage

a. Post-FIRM Construction

NOTE: These rules apply to buildings in all zones, including Zone D.

If a new policy is applied for, the rates can be based on the FIRM zone and the BFE on the old map in effect on the date the building was constructed provided that:

- The building was built in compliance with the map in effect at the time of construction; and
- The building has not been altered in any way that has resulted in a lowest floor, for rating purposes, lower than the BFE on that FIRM (e.g., enclosing the area below an elevated building); and
- The building has not been substantially improved.

The property owner or producer must provide proper documentation to the WYO company or NFIP Servicing Agent. The documentation must show: the date of the FIRM; the zone on that FIRM in which the property is located; the BFE, if any, for that zone; a copy of the map panel showing the location of the building; and the rating element that is to be grandfathered. A letter from a community official verifying this information also is acceptable.

Example:

A building was constructed in 1980 and, according to the FIRM in effect at that time, was located in Zone AE. No

insurance policy was purchased until 1990. At that time remapping had occurred and the zone had been changed to a more hazardous area, Zone VE. The new policy can use Zone AE as the rating zone if the required documentation is provided.

b. Pre-FIRM Construction

This “built in compliance” rule also applies to Pre-FIRM construction if the date of construction was on or before December 31, 1974, and was on or after the FIRM date.

Example:

A building was constructed in November 1974 and the FIRM date was May 3, 1973. The old map showed the building's location as Zone C. Ten years later in 1984, a new map placed the building in an A zone. Flood insurance coverage was applied for after the map was revised. To use the old map showing Zone C as the rating zone, proper documentation must be submitted.

D. Post-'81 V Zone Optional Rating

This optional rating is available for new and renewal policies and endorsements with effective dates on or after October 1, 1997. Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 are allowed to use the Post-'81 V Zone rate tables (Tables 3E or 3F) if the rates are more favorable to the insured. In order to qualify, the following criteria must be met:

1. The policy must be rated using the BFE printed on the FIRM panel that includes wave height. The effective date of the FIRM panel must be on or after 10/1/81.
2. The building rates are determined based on the ratio of the estimated building replacement cost and the amount of insurance purchased.
3. The building must be elevated free of obstruction or with obstruction less than 300 square feet. All machinery and equipment located below the BFE are considered obstructions.

E. Policies Requiring Re-Rating

The following conditions require that the policies be rated using the new map:

1. If an elevation-rated building is altered, making the lowest floor for rating purposes below the BFE.

Example:

An elevated building is located in an AE Zone at the time of construction. The Lowest Floor Elevation (LFE) was 18'. The BFE was 10'. The Lowest Floor rating was a +8 elevation differential. The map was revised, changing the BFE to 11'. The insured decided to enclose the area beneath the elevated floor and use it as a living area. This changed the LFE to 9'. Due to the alteration, the new map must be used and the building is rated as -2.

2. If a Pre-FIRM or Post-FIRM building is substantially improved or substantially damaged, the building must be re-rated using the FIRM in effect at the time that the substantial improvement occurred. A newer FIRM can always be used if it will result in a more favorable rating.

Example:

A building was constructed in 1972 and, when flood insurance was applied for in 1976, was found to be located in Zone C. The FIRM was revised in 1984. The building was substantially improved in 1985. Due to the improvement, the building must now be re-rated as Post-FIRM construction using the 1984 map, or the most recent map can be used if it will result in a more favorable rating.

If ineligible for renewal as a Preferred Risk Policy because of a map change, the risk must be rewritten as a Standard Flood Insurance Policy.

F. Submit-for-Rate

Certain properties at high flood risk, because of peculiarities in their exposure to flooding, do not lend themselves to preprogrammed rates. These risks require an in-depth underwriting analysis and must be submitted to the NFIP for an individual (specific) rate. As

with other lines of property insurance, the underwriter requires documentation to evaluate those risk characteristics that make up the basis for a proper rate.

The NFIP's two-fold goal of establishing sound actuarial rates and obtaining information for enforcing floodplain management requires that the following documentation be supplied for risks that fall within the submit-for-rate category:

1. Completed NFIP Flood Insurance Application.
2. Completed current Elevation Certificate.
3. Variance issued by the local community stating that permission was granted to construct the building. If no variance was granted, a statement to that effect signed by the applicant or the applicant's representative is required.
4. Recent photographs of the building (front and back), or a blueprint (layout of the building) if the building is under construction.
5. The square footage of any enclosure(s) below the elevated floor, the use of the enclosure, a list of machinery and equipment, and the approximate value of each item located in the enclosure.
6. Certified letter from either a local building official, an engineer, or an architect verifying that any such enclosures are designed/ built with breakaway walls.
7. A statement from the applicant or the applicant's representative that the enclosure was built at the time that the building was originally constructed, or at a later date (give date).
8. If the building has a basement, a list of machinery and equipment located in the basement and each item's approximate value.
9. For elevated buildings, an Elevated Building Determination Form signed by the insured.

For policies written by the NFIP Servicing Agent, all of the appropriate documentation listed above should be submitted to the NFIP Underwriting Department, P.O. Box 6466, Rockville, MD, 20849-6466.

If the building is insurable, the Underwriting Unit will deliver a written rate and the applicable ICC

premium to the producer. Since a rate must be determined on these risks, no premium is to accompany the submission. Coverage will be effective 30 days after the receipt of the premium at the NFIP, with the following two exceptions:

- If the coverage is in conjunction with the making, increasing, extending, or renewing of a loan, the effective date is on the day and time of the loan closing, provided that the policy is applied for and the presentment of premium is made at or prior to the loan closing.
- If the new policy is being obtained as a result of a revision to a community's flood map, during the 13-month period beginning on the effective date of the map revision, the effective date shall be 12:01 a.m., local time, following the day after the presentment of premium. For the NFIP direct business, the presentment of premium is the same as the receipt date of the full premium at the NFIP Servicing Agent.

Submit-for-rate quotations, excluding the ICC premium, Federal Policy Fee, and Probation Surcharge, if applicable, are valid for 90 days. After 90 days, the Flood Insurance Application and supporting documentation must be resubmitted for another determination of the rating.

G. Crawl Space

A building with a "crawl space" (under-floor space) has its interior floor area (finished or not) within 5 feet of the top of the next higher floor. If a crawl space is below grade on all sides, and the elevation of the crawl space floor is below the Base Flood Elevation, the crawl space must be rated according to the guidelines found on pages LFG 24-25. For the purpose of completing the Flood Insurance Application, the building must be described as a "non-elevated building with basement."

NFIP rules and regulations specify that a crawl space with its interior floor below grade on all sides is considered a "basement"; therefore, the Standard Flood Insurance Policy basement coverage limitations apply to such crawl spaces.

A building with a crawl space that is not subgrade must be described as an elevated building.

XVI. FIRMS WITH WAVE HEIGHTS

The producer must determine whether or not the BFE on the FIRM includes wave height. With very few exceptions (for communities on the West Coast) the Flood Insurance Rate Maps (FIRMs) published prior to January 1, 1981, give still water levels that do not include wave height. FIRMs published January 1, 1981, and later indicate whether or not wave height is included. If wave height is included, the following statement appears on the map legend:

"Coastal base flood elevations shown on this map include the effects of wave action."

These adjustments apply to 1981 Post-FIRM construction (after October 1, 1981) for Zones V1-V30 and VE.

A. Procedure for Calculating Wave Height Adjustment

The following information is needed:

- A completed Elevation Certificate.
- BFE from the Elevation Certificate (Item B9) or from the FIRM.
- Lowest Adjacent Grade from Item C3.f of the Elevation Certificate completed by a registered professional engineer, architect, or surveyor.
- Depth of Still Water Flooding (subtract the Lowest Adjacent Grade from the BFE).

The additional elevation due to wave crest in V Zone areas will normally vary from a minimum of 2.1 feet to 0.55 times the still water depth at the site. (BFE including wave height adjustment = still water BFE + 0.55 x [still water BFE - lowest adjacent grade elevation].)

For example, a building's site is determined to be located in Zone V8 with a BFE of 14' NGVD on the appropriate FIRM. Using the information from the Elevation Certificate, the BFE is calculated as follows:

Example 1:

Base flood elevation	14'
Lowest adjacent grade	<u>-6'</u>
Difference	8'
Factor	<u>x 0.55</u>
Wave height adjustment (2.1' minimum)	4.4'
Base flood elevation	<u>+ 14'</u>
BFE adjusted	18.4'

Example 2:

Base flood elevation	14'
Lowest adjacent grade	<u>-11'</u>
Difference	3'
Factor	<u>x 0.55</u>
Wave height adjustment (2.1' minimum)	1.65'
	2.1'*
Base flood elevation	<u>+ 14'</u>
BFE adjusted	16.1'

* In *Example 2*, if the calculation results in less than the minimum 2.1 feet, use 2.1 feet in the calculation of the BFE adjusted.

B. Wave Heights in Numbered Zones V1-V30 and VE 1981 Post-FIRM Construction

For most communities that have Coastal High Hazard Areas, the Wave Height Adjustment to the Base Flood Elevation (BFE) has been included on the FIRM.

No wave height adjustment is required for any numbered V Zone area included on a FIRM for any Pacific Coast community

since the wave action effects have already been considered in establishing the BFEs on the Pacific Coast.

The 1981 and later FIRMs for the Atlantic and Gulf Coast communities indicate whether or not wave height is included. If wave height is included, the following statement appears under "Notes to User" on the map legends: "Coastal base flood elevations shown on this map include the effects of wave action."

C. Unnumbered V Zones 1981 Post-FIRM Construction

Determining wave heights in coastal communities is a very important additional risk consideration in the engineering or architectural certification that the structure is securely anchored to adequately anchored pilings or columns in order to withstand velocity waters and hurricane wave wash. In these rare instances, it will be necessary to obtain, review, and reasonably utilize any BFE data available from a Federal, state, or other source, until such other data have been provided by the Federal Emergency Management Agency as criteria to determine the BFEs, including wave heights.

D. Rate Selection Procedure

Factors used in determining the appropriate insurance rate are:

1. The elevation of the building relative to the BFE adjusted by the wave height factor for an individual building site or the actual FIRM BFEs on the appropriate FIRM (include the effect of wave action [wave height]), and
2. The existence or non-existence of obstructions under the beam supporting the building's lowest floor.

The replacement cost ratio is used to select the specific rate. Complete the appropriate section of the Application.

XVII. FLOODPROOFED BUILDINGS

Floodproofing and the completion of the Floodproofing Certificate are described in detail in the Special Certifications section.

A. Elevation Difference

To determine the elevation difference used for the rating of floodproofed buildings, the following procedures should be used if rounding is necessary:

1. Round floodproofed elevation to the nearest foot if the BFE is shown in feet. Convert the floodproofed elevation to tenths of feet if the BFE is shown in tenths of feet.
2. The elevation difference should be rounded to the nearest higher elevation. Use 0.5 feet as the midpoint and always round up. (Example: +1.5 becomes +2; -0.5 becomes 0; -1.4 becomes -1; -1.5 becomes -1; -1.6 becomes -2.)

In order to qualify for floodproofing credit, buildings in AE, A1-A30, AH, and AO Zones must be floodproofed to at least 1 foot higher than their BFEs.

B. Rating

When computing a premium for a floodproofed building, use the following procedure:

1. Determine how far above the BFE the building is floodproofed. (For example, the building will be floodproofed at +1 foot, +2 feet, and so forth above BFE.)
2. Subtract 1 foot to determine the elevation to be used in determining the rate and computing the premium for the building.
3. Find the rate for the given building in the proper zone at the "adjusted" elevation.
4. Compute the premium as usual.

The building must be floodproofed to +1 foot in order to receive a rate equivalent to a building with its lowest floor elevated to the BFE.

For example, if the building is located in Zone AO and the community's floodproofing standards have been approved to a level of 3 feet above grade (ground level) for the lowest floor of a nonfloodproofed building, to qualify for AOB, a building must meet the following standards:

XIX. RATING EXAMPLES

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EXAMPLE 1

EMERGENCY PROGRAM, STANDARD DEDUCTIBLE

Data Essential To Determine Appropriate Rates and Premium:

- **Emergency Program**
- Flood Zone: N/A
- Occupancy: Single-Family Dwelling
- # of Floors: 1 Floor
- Basement/Enclosure: None
- Deductible: \$1,000/\$1,000 (Standard)
- Deductible Factor: 1.000
- Contents Location: Lowest Floor Above Ground Level
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Flood Proofed Yes/No: No
- Building Coverage: \$35,000
- Contents: \$10,000
- ICC Premium: N/A
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .76 Contents: .96

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE	BASIC AND ADDITIONAL	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	PREM. REDUCTION/ INCREASE	TOTAL AMOUNT OF INSURANCE	
BUILDING	35,000	.76	266				0	35,000	266
CONTENTS	10,000	.96	96				0	10,000	96
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING						PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 362 ICC PREMIUM — SUBTOTAL 362 CRS PREMIUM DISCOUNT _____% SUBTOTAL 362	
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)						PROBATION SURCHARGE —		—	
						FEDERAL POLICY FEE 30		30	
						TOTAL PREPAID AMOUNT 392		392	

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$266 / Contents: \$96 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$266 = \$266 / Contents: 1.000 x \$96 = \$96 |
| 3. Premium Reduction/Increase: | Building: \$0 / Contents: \$0 |
| 4. Subtotal: | \$362 |
| 5. Add ICC Premium: | N/A |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$362 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$392 |

EXAMPLE 2

REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, \$2,000/\$1,000 DEDUCTIBLE OPTION, ZONE B

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: B
- Occupancy: Single-Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$2,000/\$1,000
- Deductible Factor: .950
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Flood Proofed Yes/No: No
- Building Coverage: \$150,000
- Contents Coverage: \$60,000
- ICC Premium: \$6
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .58/.14 Contents: .94/.25

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.58	290	100,000	.14	140	-21	150,000	409
CONTENTS	20,000	.94	188	40,000	.25	100	-14	60,000	274
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 683
							ICC PREMIUM		6
							SUBTOTAL		689
							CRS PREMIUM DISCOUNT ____%		—
							SUBTOTAL		689
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		719

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$430 / Contents: \$288 |
| 2. Apply Deductible Factor: | Building: .950 x \$430 = \$409 / Contents: .950 x \$288 = \$274 |
| 3. Premium Reduction: | Building: \$430 - \$409 = \$21 / Contents: \$288 - \$274 = \$14 |
| 4. Subtotal: | \$683 |
| 5. Add ICC Premium: | \$6 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$689 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$719 |

EXAMPLE 3

REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, \$500 DEDUCTIBLE OPTION (SURCHARGE), ZONE AE

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**
- Flood Zone: AE
- Occupancy: Single-Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: Enclosure
- Deductible: \$500/\$500
- Deductible Factor: 1.100 (Surcharge)
- Contents Location: Enclosure and Above
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Flood Proofed Yes/No: No
- Building Coverage: \$150,000
- Contents Coverage: \$60,000
- ICC Premium: \$75
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .81/.60 Contents: .96/.60

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.81	405	100,000	.60	600	+101	150,000	1,106
CONTENTS	20,000	.96	192	40,000	.60	240	+43	60,000	475
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 1,581
							ICC PREMIUM 75		
							SUBTOTAL 1,656		
							CRS PREMIUM DISCOUNT _____% —		
							SUBTOTAL 1,656		
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____							PROBATION SURCHARGE —		
							FEDERAL POLICY FEE 30		
							TOTAL PREPAID AMOUNT 1,686		

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$1,005 / Contents: \$432 |
| 2. Apply Deductible Factor: | Building: 1.100 x \$1,005 = \$1,106 / Contents: 1.100 x \$432 = \$475 |
| 3. Premium Increase: | Building: \$1,106 - \$1,105 = \$101 / Contents: \$475 - \$432 = \$43 |
| 4. Subtotal: | \$1,581 |
| 5. Add ICC Premium: | \$75 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$1,656 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$1,686 |

Building: .81/.50 Contents: .96/.50

Premium Calculation:

- May 1, 2004**

EXAMPLE 5

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$5,000/\$5,000 DEDUCTIBLE OPTION, ZONE AE

Data Essential To Determine Appropriate Rates and Premium:

Regular Program

- Flood Zone: AE
- Occupancy: Non-Residential
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$5,000/\$5,000
- Deductible Factor: .870
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +4
- Flood Proofed Yes/No: No
- Building Coverage: \$500,000
- Contents Coverage: \$500,000
- ICC Premium: \$4
- CRS Rating: 5
- CRS Discount: 25%

Determined Rates:

Building: .20/.08

Contents: .22/.12

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	150,000	.20	300	350,000	.08	280	-75	500,000	505
CONTENTS	130,000	.22	286	370,000	.12	444	-95	500,000	635
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 1,140
							ICC PREMIUM		4
							SUBTOTAL		1,144
							CRS PREMIUM DISCOUNT <u>25%</u>		-286
							SUBTOTAL		858
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		888
SIGNATURE OF INSURANCE AGENT/BROKER _____							DATE (MM/DD/YY) _____		

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$580 / Contents: \$730 |
| 2. Apply Deductible Factor: | Building: .870 x \$580 = \$505 / Contents: .870 x \$730 = \$635 |
| 3. Premium Reduction: | Building: \$580 - \$505 = \$75 / Contents: \$730 - \$635 = \$95 |
| 4. Subtotal: | \$1,140 |
| 5. Add ICC Premium: | \$4 |
| 6. Subtract CRS Discount: | -\$286 (25%) |
| 7. Subtotal: | \$858 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$888 |

EXAMPLE 6

REGULAR PROGRAM, 1975-81 POST-FIRM V1-V30, ELEVATION RATED, ZONE V13

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: V13
- Occupancy: Single-Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: 1975 - 81 (Post-FIRM)
- Elevation Difference: +1
- Flood Proofed Yes/No: No
- Building Coverage: \$150,000
- Contents Coverage: \$100,000
- ICC Premium: \$35
- CRS Rating: 8
- CRS Discount: 10%

Determined Rates:

Building: 1.53/.34 Contents: 1.92/.45

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	1.53	765	100,000	.34	340	0	150,000	1,105
CONTENTS	20,000	1.92	334	80,000	.45	360	0	100,000	744
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING						PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 1,849 ICC PREMIUM 35 SUBTOTAL 1,884 CRS PREMIUM DISCOUNT <u>10%</u> -188 SUBTOTAL 1,696	
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)						PROBATION SURCHARGE —			
						FEDERAL POLICY FEE 30			
						TOTAL PREPAID AMOUNT 1,726			

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$1,105 / Contents: \$744 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$1,105 = \$1,105 / Contents: 1.000 x \$744 = \$744 |
| 3. Premium Reduction/Increase: | Building: \$0 / Contents: \$0 |
| 4. Subtotal: | \$1,849 |
| 5. Add ICC Premium: | \$35 |
| 6. Subtract CRS Discount: | -\$188 (10%) |
| 7. Subtotal: | \$1,696 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$1,726 |

EXAMPLE 7

REGULAR PROGRAM, POST-1981 VE OR V1-V30, WITH ENCLOSURE, ZONE VE

Data Essential To Determine Appropriate Rates and Premium:

- Regular Program**

- Flood Zone: VE
- Occupancy: Single-Family Dwelling
- # of Floors: 3 or More Floors
- Basement/Enclosure: Enclosure (< 300 sq. ft., w/o M&E)
- Deductible: \$3,000/\$3,000
- Deductible Factor: .825
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-81
- Elevation Difference: -1
- Flood Proofed Yes/No: No
- Replacement Cost: \$300,000
- Building Coverage: \$250,000
- Contents Coverage: \$100,000
- ICC Premium: \$14
- CRS Rating: 9
- CRS Discount: 5%

Determined Rates:

Building: 2.24/2.24

Contents: 1.68/1.68

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	2.24	1,120	200,000	2.24	4,480	-980	250,000	4,620
CONTENTS	20,000	1.68	336	80,000	1.68	1,344	-294	100,000	1,386
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 6,006
							ICC PREMIUM		14
							SUBTOTAL		6,020
							CRS PREMIUM DISCOUNT <u>5%</u>		-301
							SUBTOTAL		5,719
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		5,749

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$5,600 / Contents: \$1,680 |
| 2. Apply Deductible Factor: | Building: .825 x \$5,600 = \$4,620 / Contents: .825 x \$1,680 = \$1,386 |
| 3. Premium Reduction: | Building: \$5,600 - \$4,620 = \$980 / Contents: \$1,680 - \$1,386 = \$294 |
| 4. Subtotal: | \$6,006 |
| 5. Add ICC Premium: | \$14 |
| 6. Subtract CRS Discount: | -\$301 (5%) |
| 7. Subtotal: | \$5,719 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$5,749 |

EXAMPLE 8

REGULAR PROGRAM, POST-FIRM CONSTRUCTION, CONTENTS-ONLY POLICY, ZONE A17

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: A17
- Occupancy: 2-4 Family Dwelling (Renter's Policy)
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500
- Deductible Factor: 1.000
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +2
- Flood Proofed Yes/No: No
- Building Coverage: N/A
- Contents Coverage: \$100,000
- ICC Premium: N/A
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: N/A Contents: .38/.12

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM	
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM				
BUILDING	0									
CONTENTS	20,000	.38	76	80,000	.12	96	0	100,000	172	
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL ICC PREMIUM SUBTOTAL CRS PREMIUM DISCOUNT ____% SUBTOTAL	172 — 172 — 172
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—	
							FEDERAL POLICY FEE		30	
							TOTAL PREPAID AMOUNT		202	

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: N/A / Contents: \$172 |
| 2. Apply Deductible Factor: | Building: N/A / Contents: 1.000 x \$172 = \$172 |
| 3. Premium Reduction/Increase: | Building: N/A / Contents: \$0 |
| 4. Subtotal: | \$172 |
| 5. Add ICC Premium: | N/A |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$172 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$202 |

EXAMPLE 9

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$5,000/\$5,000 DEDUCTIBLE OPTION, ZONE AO

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: AO
- Occupancy: Non-Residential
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$5,000/\$5,000
- Deductible Factor: .870
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: -1
- Flood Proofed Yes/No: No
- Building Coverage: \$500,000
- Contents Coverage: \$500,000
- ICC Premium: \$4
- CRS Rating: 5
- CRS Discount: 25%

Determined Rates:

Building: .84/.30

Contents: 1.63/.25

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	150,000	.84	1,260	350,000	.30	1,050	-300	500,000	2,010
CONTENTS	130,000	1.63	2,119	370,000	.25	925	-396	500,000	2,648
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 4,658
							ICC PREMIUM 4		
							SUBTOTAL 4,662		
							CRS PREMIUM DISCOUNT <u>25%</u> 1,166		
							SUBTOTAL 3,496		
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____							PROBATION SURCHARGE —		
							FEDERAL POLICY FEE 30		
							TOTAL PREPAID AMOUNT 3,526		

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$2,310 / Contents: \$3,044 |
| 2. Apply Deductible Factor: | Building: .870 x \$2,310 = \$2,010 / Contents: .870 x \$3,044 = \$2,648 |
| 3. Premium Reduction: | Building: \$2,310 - \$2,010 = \$300 / Contents: \$3,044 - \$2,648 = \$396 |
| 4. Subtotal: | \$4,662 |
| 5. Add ICC Premium: | \$4 |
| 6. Subtract CRS Discount: | -\$1,166 (25%) |
| 7. Subtotal: | \$3,496 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$3,526 |

EXAMPLE 10

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$500/\$500 DEDUCTIBLE OPTION, ZONE AOB

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: AOB
- Occupancy: Single-Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +1
- Flood Proofed Yes/No: No
- Building Coverage: \$250,000
- Contents Coverage: \$100,000
- ICC Premium: \$4
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .25/.06 Contents: .34/.11

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.25	125	200,000	.06	120	0	250,000	245
CONTENTS	20,000	.34	68	80,000	.11	88	0	100,000	156
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 401
							ICC PREMIUM		4
							SUBTOTAL		405
							CRS PREMIUM DISCOUNT _____%		—
							SUBTOTAL		405
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		435

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$245 / Contents: \$156 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$245 = \$245 / Contents: 1.000 x \$156 = \$156 |
| 3. Premium Reduction: | Building: \$0 / Contents: = \$0 |
| 4. Subtotal: | \$405 |
| 5. Add ICC Premium: | \$4 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$405 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$435 |

EXAMPLE 11

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$3,000/\$2,000 DEDUCTIBLE OPTION, ZONE AH

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**
- Flood Zone: AH
- Occupancy: Single-Family Dwelling
- # of Floors: 1 Floor
- Basement/Enclosure: None
- Deductible: \$3,000/\$2,000
- Deductible Factor: .875
- Contents Location: Lowest Floor Above Ground Level
- Date of Construction: Post-FIRM
- Elevation Difference: -1
- Flood Proofed Yes/No: No
- Building Coverage: \$250,000
- Contents Coverage: \$25,000
- ICC Premium: \$4
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .84/.30 Contents: 1.63/.25

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.84	420	200,000	.30	600	-127	250,000	893
CONTENTS	20,000	1.63	326	5,000	.25	13	-42	25,000	297
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL 1,190
							ICC PREMIUM 4		
							SUBTOTAL 1,194		
							CRS PREMIUM DISCOUNT <u>.30%</u> -385		
							SUBTOTAL 836		
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____							PROBATION SURCHARGE —		
							FEDERAL POLICY FEE 30		
							TOTAL PREPAID AMOUNT 866		

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$1,020 / Contents: \$339 |
| 2. Apply Deductible Factor: | Building: .875 x \$1,020 = \$893 / Contents: .875 x \$339 = \$297 |
| 3. Premium Reduction: | Building: \$1,020 - \$893 = \$127 / Contents = \$339 - \$297 = \$42 |
| 4. Subtotal: | \$1,190 |
| 5. Add ICC Premium: | \$4 |
| 6. Subtract CRS Discount: | \$358 |
| 7. Subtotal: | \$836 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$866 |

EXAMPLE 12

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$500/\$500 DEDUCTIBLE OPTION, ZONE AHB

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: AHB
- Occupancy: 2-4 Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +3
- Flood Proofed Yes/No: No
- Building Coverage: \$200,000
- Contents Coverage: \$40,000
- ICC Premium: \$4
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .25/.06 Contents: .34/.11

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM	
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM				
BUILDING	50,000	.25	125	150,000	.06	90	0	200,000	215	
CONTENTS	20,000	.34	68	20,000	.11	22	0	40,000	90	
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL ICC PREMIUM SUBTOTAL CRS PREMIUM DISCOUNT _____% SUBTOTAL PROBATION SURCHARGE FEDERAL POLICY FEE TOTAL PREPAID AMOUNT	305 6 311 — 311 — 30 341
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____										

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$215 / Contents: \$90 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$215 = \$215 / Contents: 1.000 x \$90 = \$90 |
| 3. Premium Reduction: | Building: \$0 / Contents: \$0 |
| 4. Subtotal: | \$305 |
| 5. Add ICC Premium: | \$6 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$311 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$341 |

EXAMPLE 13

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$500/\$500 DEDUCTIBLE OPTION, ZONE A (WITH ESTIMATED BFE)

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**
- Flood Zone: A
- Occupancy: 2-4 Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +6 (with Estimated BFE)
- Flood Proofed Yes/No: No
- Building Coverage: \$140,000
- Contents Coverage: \$70,000
- ICC Premium: \$6
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .32/.08 Contents: .50/.12

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.32	160	90,000	.08	72	0	140,000	232
CONTENTS	20,000	.50	100	50,000	.12	60	0	70,000	160
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER:		ANNUAL SUBTOTAL 392
							ICC PREMIUM		6
							SUBTOTAL		398
							CRS PREMIUM DISCOUNT _____%		—
							SUBTOTAL		398
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		428

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$232 / Contents: \$160 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$232 = \$232 / Contents: 1.000 x \$160 = \$160 |
| 3. Premium Reduction: | Building: \$0 / Contents = \$0 |
| 4. Subtotal: | \$392 |
| 5. Add ICC Premium: | \$6 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$398 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$428 |

EXAMPLE 14

REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, \$500/\$500 DEDUCTIBLE OPTION, ZONE A (WITHOUT ESTIMATED BFE)

Data Essential To Determine Appropriate Rates and Premium:

- **Regular Program**

- Flood Zone: A
- Occupancy: Single-Family Dwelling
- # of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +5 (without Estimated BFE)
- Flood Proofed Yes/No: No
- Building Coverage: \$135,000
- Contents Coverage: \$60,000
- ICC Premium: \$4
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .36/.10 Contents: .62/.12

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	50,000	.36	180	85,000	.10	85	0	135,000	265
CONTENTS	20,000	.62	124	40,000	.12	48	0	60,000	172
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER:		ANNUAL SUBTOTAL 437
							ICC PREMIUM		6
							SUBTOTAL		443
							CRS PREMIUM DISCOUNT _____%		—
							SUBTOTAL		443
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—
							FEDERAL POLICY FEE		30
							TOTAL PREPAID AMOUNT		473

Premium Calculation:

- | | |
|---------------------------------------|---|
| 1. Multiply Rate x \$100 of Coverage: | Building: \$265 / Contents: \$172 |
| 2. Apply Deductible Factor: | Building: 1.000 x \$265 = \$265 / Contents: 1.000 x \$172 = \$172 |
| 3. Premium Reduction: | Building: \$0 / Contents: \$0 |
| 4. Subtotal: | \$437 |
| 5. Add ICC Premium: | \$6 |
| 6. Subtract CRS Discount: | N/A |
| 7. Subtotal: | \$443 |
| 8. Probation Surcharge: | N/A |
| 9. Add Federal Policy Fee: | \$30 |
| 10. Total Prepaid Premium: | \$473 |

- For high-rise condominiums, the building basic amount of insurance is \$150,000.
- The contents basic limit amount of insurance is \$20,000.
- For condominium unit owners who have insured their personal property under the Dwelling Form or General Property Form, coverage extends to interior walls, floor, and ceiling (if not covered under the condominium association's insurance) up to 10 percent of the personal property limit of liability. Use of this coverage is at the option of the insured and reduces the personal property limit of liability.

C. Replacement Cost and Coinsurance

Replacement cost coverage is available for building coverage only on all RCBAP and all Dwelling Policies meeting eligibility requirements. Co-insurance penalties are applied for *building coverage* only. To the extent the insured has not purchased insurance in an amount equal to the lesser of 80 percent or more of the full replacement cost of the building at the time of loss or the maximum amount of insurance under the NFIP, the insured will not be reimbursed fully for a loss. Building coverage purchased under individual Dwelling Policies cannot be added to RCBAP coverage in order to avoid the coinsurance penalty. The amount of loss in this case will be determined by using the following formula:

Insurance Carried X Amount of Loss = Limit of Recovery
Insurance Required

Where the penalty applies, building loss under the RCBAP will be adjusted based on the Replacement Cost Coverage with a coinsurance penalty. Building loss under the Dwelling Form will be adjusted on an Actual Cash Value (ACV) basis if the Replacement Cost provision is not met. The cost of bringing the building into compliance with local codes (law and ordinance) is not included in the calculation of replacement cost.

D. Assessment Coverage

The RCBAP does not provide assessment coverage.

Assessment coverage is available only under the Dwelling Policy form subject to the conditions and exclusions found in Section III. Property Covered, Coverage C, paragraph 3 – Condominium Loss Assessments. The Dwelling Policy form will respond, up to the building coverage limit, to assessments against unit owners for damages to common areas of any building owned by the

condominium association, even if the building is not insured, provided that: (1) each of the unit owners comprising the membership of the association is assessed by reason of the same cause; and (2) the assessment arises out of a direct physical loss by or from flood to the condominium building at the time of the loss. Assessment coverage has a maximum combined total limit of \$250,000 per unit. This combined total limit covers loss to the unit and any assessment by the association.

Assessment coverage cannot be used to meet the 80-percent coinsurance provision of the RCBAP, and does not apply to ICC coverage or to coverage for closed basin lakes.

V. DEDUCTIBLES AND FEES

A. Deductibles

The loss deductible shall apply separately to each building and personal property covered loss including any appurtenant structure loss.

The Standard Deductible is \$1,000 for a residential condominium building, located in a Regular Program Community in Special Flood Hazard Areas, i.e., Zones A, AO, AH, A1-A30, AE, AR, AR dual zones (AR/AE, AR/AH, AR/AO, AR/A1-A30, AR/A), V, V1-V30, or VE, where the rates available for buildings built before the effective date of the initial Flood Insurance Rate Map (FIRM), Pre-FIRM rates, are used to compute the premium.

For all policies rated other than those described above, e.g., those rated as Post-FIRM and those rated in Zones A99, B, C, D, or X, the Standard Deductible is \$500.

Optional deductible amounts are available under the RCBAP.

B. Expense Constant

The Expense Constant formerly charged on new and renewal RCBAPs (and other policies) was eliminated effective May 1, 2003.

C. Federal Policy Fee

The following are the Federal Policy Fees for the RCBAP:

1 unit	- \$ 30.00 per policy
2-4 units	- \$ 60.00 per policy
5-10 units	- \$150.00 per policy
11-20 units	- \$330.00 per policy
21 or more	- \$630.00 per policy

VI. TENTATIVE RATES AND SCHEDULED BUILDINGS

Tentative Rates cannot be applied to the RCBAP. The Scheduled Building Policy is not available for the RCBAP.

VII. COMMISSIONS (DIRECT BUSINESS ONLY)

The commission, 15 percent, will be reduced to 5 percent on only that portion of the premium that exceeds the figure resulting from multiplying the total number of units times \$2,000.

VIII. CANCELLATION OR ENDORSEMENT OF EXISTING UNIT OWNERS' DWELLING POLICIES

Unit owner's Dwelling Policies may be cancelled mid-term for the reasons mentioned in the Cancellation/Nullification section of the manual. To cancel building coverage while retaining contents coverage on a unit owner's policy, submit a General Change Endorsement form. In the event of a cancellation:

- The commission on a unit owner's policy will be retained, in full, by the producer,
- The Expense Constant, Federal Policy Fee, and Probation Surcharge will be refunded on a pro rata basis, and
- The premium refund will be calculated on a pro rata basis.

An existing Dwelling Policy or RCBAP may be endorsed to increase amounts of coverage in accordance with Endorsement rules. They may not be endorsed mid-term to reduce coverage.

IX. APPLICATION FORM

The producer should complete the entire Application according to the directions in the Application section and attach two new photographs of the building, one of which clearly shows the location of the lowest floor used for rating the risk.

A. Type of Building

For an RCBAP, the Application form must indicate the total number of units in the building and whether the building is a high rise or low rise.

High-rise (vertical) condominium buildings are defined as containing at least five units, and

having at least three floors. Note that an enclosure below an elevated floor building, even if it is the lowest floor for rating purposes, cannot be counted as a floor to classify the building as a high-rise condominium building.

Low-rise condominium buildings are defined as having less than five units and/or less than three floors. In addition, low-rise also includes all townhouses/rowhouses regardless of the number of floors or units, and all detached single family buildings.

For a Dwelling Policy used to insure a condominium unit, or for a Condominium Association Policy, see the Application Section.

B. Replacement Cost Value

For an RCBAP, provide the Replacement Cost Value (RCV) for the building, including the cost of the foundation. For an RCBAP, attach the appropriate valuation to the Application.

Acceptable documentation of a building's RCV is a recent property inspection report that states the building's value on an RCV basis. The cost of the building's foundation must be included in determining the RCV. The cost of bringing the building into compliance with local codes (law and ordinance) is not to be included in the calculation of the building's replacement cost. To maintain reasonable accuracy of the RCV for the building, the agent must update this information at least every 3 years.

C. Coverage

Ensure the Application form accurately reflects the desired amount of building and contents coverage.

If only building insurance is to be purchased, be sure to notify the applicant of the availability of contents insurance for contents that are commonly owned. It is recommended that the applicant initial the contents coverage section if no contents insurance is requested. (This will make the applicant aware that the policy will not provide payment for contents losses.)

1. Building

Enter the amount of insurance for building, Basic and Additional Limits. Enter full Basic Limits before entering any Additional Limits. The building Basic Limit amount of insurance for high-rise condominium buildings is up to a maximum of \$150,000.

The building Basic Limit amount of insurance for low-rise condominium buildings is \$50,000 multiplied by the number of units in the building. The total amount of coverage desired on the entire building must not exceed \$250,000 (Regular Program limit) times the total number of units (residential and nonresidential) in the building.

2. Contents

Since the Program type must be Regular, enter the amount of insurance for contents, Basic and Additional Limits. Enter full Basic Limits before any Additional Limits. Contents coverage is only for those contents items that are commonly owned. For the Basic Limits amount of insurance, up to a maximum of \$20,000 may be filled in. For the Additional Limits, up to a total of \$80,000 may be filled in. The total amount of insurance available for contents coverage cannot exceed \$100,000.

D. Rates and Fees

1. To determine rates, see the RCBAP Rate Tables on the following pages. Enter the

rate for building and for contents and compute the annual premium. If an optional deductible has been selected for building and/or contents, see page CONDO 22.

2. Enter the total premium for building and contents, adjusted for any premium change because of an optional deductible being selected. The total premium will be calculated as if the building were one unit.
3. Add the total premium for building and contents and enter the Annual Subtotal.
4. Add the ICC premium.
5. Calculate the CRS discount, if applicable.
6. Subtract the CRS discount, if applicable.
7. Add the \$50.00 Probation Surcharge, if applicable.
8. Add the Federal Policy Fee to determine the Total Prepaid Amount.

TABLE 3A. RCBAP HIGH-RISE CONDOMINIUM RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

BUILDING

BUILDING TYPE	REGULAR PROGRAM PRE-FIRM ¹			REGULAR PROGRAM POST-FIRM	
	A, A1-A30, AE, AO, AH, D	V, VE	A99, B, C, X	A99, B, C, X	D
No Basement/Enclosure	.85/.14	1.08/.34	.90/.04	.90/.04	.87/.19
With Basement	.90/.23	1.15/.81	1.15/.06	1.15/.06	SUBMIT FOR RATE
With Enclosure	.90/.14	1.15/.34	.90/.04	.90/.04	

CONTENTS

CONTENTS LOCATION	REGULAR PROGRAM PRE-FIRM ¹			REGULAR PROGRAM POST-FIRM	
	A, A1-A30, AE, AO, AH, D	V, VE	A99, B, C, X	A99, B, C, X	D
Basement and above	.96/.50	1.23/1.33	1.26/.46	1.26/.46	SUBMIT FOR RATE
Enclosure and above	.96/.60	1.23/1.58	1.26/.51	1.26/.51	
Lowest floor only- above ground level	.96/.60	1.23/1.58	.94/.48	.94/.48	.96/.60
Lowest floor above ground level and higher floors	.96/.41	1.23/1.39	.94/.25	.94/.25	.96/.41
Above ground level more than 1 full floor	.35/.12	.47/.29	.35/.12	.35/.12	.35/.12

BUILDING—A1-A30, AE · POST-FIRM

ELEVATION	3 OR MORE FLOORS NO BASEMENT/ENCLOSURE	3 OR MORE FLOORS WITH BASEMENT/ENCLOSURE
+4	.33/.03	.33/.03
+3	.34/.03	.34/.03
+2	.35/.03	.35/.03
+1	.62/.04	.44/.04
0	1.17/.04	1.05/.04
-1 ²	3.73/.14	2.10/.11
-2	SUBMIT FOR RATE	

CONTENTS—A1-A30, AE · POST-FIRM

ELEVATION	LOWEST FLOOR ONLY- ABOVE GROUND LEVEL (NO BSMNT./ENCL.)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER (NO BSMNT./ENCL.)	BASEMENT/ ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL - MORE THAN ONE FULL FLOOR
+4	.38/.12	.38/.12	.38/.12	.35/.12
+3	.38/.12	.38/.12	.38/.12	.35/.12
+2	.38/.12	.38/.12	.38/.12	.35/.12
+1	.59/.12	.41/.12	.38/.12	.35/.12
0	1.10/.12	.72/.12	.40/.12	.35/.12
-1 ²	3.01/.75	1.78/.58	.48/.12	.35/.12
-2	SUBMIT FOR RATE			

¹Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM). If FIRM Zone is unknown, use rates for Zones A, AE, AO, AH, D.

²Use Submit-for-Rate guidelines if either the enclosure below the lowest elevated floor of an elevated building or the crawl space (under-floor space) that has its interior floor within 2 feet below grade on all sides, which is used for rating, is 1 or more feet below BFE.

TABLE 3B. RCBAP HIGH-RISE CONDOMINIUM RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

AO, AH POST-FIRM NO BASEMENT/ENCLOSURE BUILDINGS¹

	BUILDING	CONTENTS
WITH CERTIFICATE OF COMPLIANCE ²	.34/.04	.34/.11
WITHOUT CERTIFICATE OF COMPLIANCE OR WITHOUT ELEVATION CERTIFICATE ³	.94/.06	.97/.20

**POST-FIRM
UNNUMBERED A-ZONE - WITHOUT BASEMENT/ENCLOSURE¹**

ELEVATION DIFFERENCE TO NEAREST FOOT	BUILDING	CONTENTS⁴	TYPE OF ELEVATION CERTIFICATE
+5 OR MORE	.70/.05	.62/./12	NO ESTIMATED BASE FLOOD ELEVATION ⁵
+2 TO +4	1.05/.05	.82/.17	
+1	1.74/.11	1.40/.63	
0 OR BELOW	***	***	
+2 OR MORE	.61/.04	.50/.12	WITH ESTIMATED BASE FLOOD ELEVATION ⁶
0 TO +1	.88/.05	.72/.15	
-1	3.55/.14	2.08/.67	
-2 OR BELOW	***	***	
NO ELEVATION CERTIFICATE	4.60/1.06	2.61/1.00	NO ELEVATION CERTIFICATE

¹Zones A, AO, or AH buildings with basement/enclosure--Submit for Rating.

²"With Certification" rates are to be used when the Elevation Certificate shows that the lowest floor elevation is equal to or greater than the community's elevation requirement.

³"Without Certification" rates are to be used only on Post-FIRM structures without an Elevation Certificate or when the Elevation Certificate shows that the lowest floor elevation of a Post-FIRM structure is less than the community's elevation requirement.

⁴For elevation rated policies, when contents are located one floor or more above lowest floor used for rating, use .35/.12.

⁵NO ESTIMATED BASE FLOOD ELEVATION: Elevation difference is the measured distance between the lowest floor of the building and the highest adjacent grade next to the building.

⁶WITH ESTIMATED BASE FLOOD ELEVATION: Elevation difference is the measured distance between the lowest floor of the building and the estimated BFE provided by the community or registered professional engineer, surveyor, or architect.

*****SUBMIT FOR RATING.**

TABLE 3C. RCBAP HIGH-RISE CONDOMINIUM RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

AR AND AR DUAL ZONES

BUILDING

PRE-FIRM^{1,2} AND POST-FIRM³ NOT ELEVATION-RATED

BUILDING TYPE	RATES
No Basement/Enclosure	.90/.04
With Basement	1.15/.06
With Enclosure	.90/.04

CONTENTS

PRE-FIRM^{1,2} AND POST-FIRM³ NOT ELEVATION-RATED

CONTENTS LOCATION	RATES
Basement and above	1.26/.46
Enclosure and above	1.26/.51
Lowest floor only- above ground level	.94/.48
Lowest floor above ground level and higher floors	.94/.25
Above ground level more than 1 full floor	.35/.12

BUILDING

PRE-FIRM AND POST-FIRM ELEVATION-RATED

ELEVATION	3 OR MORE FLOORS NO BASEMENT/ENCLOSURE	3 OR MORE FLOORS WITH BASEMENT/ENCLOSURE
+4	.33/.03	.33/.03
+3	.34/.03	.34/.03
+2	.35/.03	.35/.03
+1	.62/.04	.44/.04
0	.90/.04	1.05/.04
-1 ⁴	See Footnote	

CONTENTS

PRE-FIRM AND POST-FIRM ELEVATION-RATED

ELEVATION	LOWEST FLOOR ONLY- ABOVE GROUND LEVEL (NO BSMNT./ENCL.)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER (NO BSMNT./ENCL.)	BASEMENT/ ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL - MORE THAN ONE FULL FLOOR
+4	.38/.12	.38/.12	.38/.12	.35/.12
+3	.38/.12	.38/.12	.38/.12	.35/.12
+2	.38/.12	.38/.12	.38/.12	.35/.12
+1	.59/.12	.41/.12	.38/.12	.35/.12
0	1.10/.12	.72/.12	.40/.12	.35/.12
-1 ⁴	See Footnote			

¹Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM).

²Base deductible is \$1,000.

³Base deductible is \$500.

⁴Use Pre-FIRM AR and AR Dual Zones Rate Table above.

TABLE 3D. RCBAP HIGH-RISE CONDOMINIUM RATES
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

REGULAR PROGRAM -- 1975-1981¹ -- POST-FIRM CONSTRUCTION²

FIRM ZONES V1-V30, VE -- BUILDING RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	BUILDING TYPE	
	3 OR MORE FLOORS NO BASEMENT/ENCLOSURE	3 OR MORE FLOORS WITH BASEMENT/ENCLOSURE
0 ³	2.23/.11	2.13/.11
-1 ⁴	6.54/.41	3.42/.31
-2	***	***

1975-1981 POST-FIRM CONSTRUCTION
FIRM ZONES V1-V30, VE--CONTENTS RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	CONTENTS LOCATION			
	LOWEST FLOOR ONLY--ABOVE GROUND LEVEL (NO BASEMENT/ENCLOSURE)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER FLOORS (NO BASEMENT/ENCLOSURE)	BASEMENT/ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL--MORE THAN ONE FULL FLOOR
0 ³	2.94/.41	1.92/.45	1.08/.50	.55/.25
-1 ⁴	6.47/3.14	3.82/2.43	1.27/.50	.55/.25
-2	***	***	***	***

¹Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post-'81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

²For 1981 Post-FIRM construction rating, refer to pages CONDO 19-20.

³These rates are to be used if the lowest floor of the building is at or above the BFE.

⁴Use Submit-for-Rate guidelines if the enclosure below the lowest floor of an elevated building, which is used for rating, is 1 or more feet below BFE.

*****SUBMIT FOR RATING.**

REGULAR PROGRAM 1975-1981 POST-FIRM CONSTRUCTION¹
UNNUMBERED V ZONE--ELEVATED BUILDINGS

SUBMIT FOR RATING

TABLE 4A. RCBAP LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

REGULAR PROGRAM -- PRE-FIRM CONSTRUCTION RATES ¹

FIRM ZONES:		A, A1-A30, AE, AO, AH, D		V, VE		A99, B, C, X	
		BUILDING	CONTENTS	BUILDING	CONTENTS	BUILDING	CONTENTS
BUILDING TYPE	NO BASEMENT/ENCLOSURE	.70/.32	.96/.60	.93/.85	1.23/1.58	.52/.14	.94/.25
	WITH BASEMENT	.75/.40	.96/.50	1.00/1.48	1.23/1.33	.60/.20	1.12/.38
	WITH ENCLOSURE	.75/.46	.96/.52	1.00/1.61	1.23/1.58	.60/.22	1.12/.43

REGULAR PROGRAM -- POST-FIRM CONSTRUCTION RATES

FIRM ZONES:		A99, B, C, X		D	
		BUILDING	CONTENTS	BUILDING	CONTENTS
BUILDING TYPE	NO BASEMENT/ENCLOSURE	.52/.14	.94/.25	.70/.32	.96/.55
	WITH BASEMENT	.60/.20	1.12/.38	***	***
	WITH ENCLOSURE	.60/.22	1.12/.43		
FIRM ZONES:		AO, AH (NO BASEMENT/ENCLOSURE BUILDINGS ONLY) ²			
		BUILDING		CONTENTS	
WITH CERTIFICATION OF COMPLIANCE (AOB, AHB) ³		.19/.06		.34/.11	
WITHOUT CERTIFICATION OF COMPLIANCE OR WITHOUT ELEVATION CERTIFICATE ⁴		.71/.17		.97/.20	

¹Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM). If FIRM Zone is unknown, use rates for Zones A, AE, AO, AH, D.

²Zones AO, AH BUILDINGS WITH BASEMENT: Submit for Rating.

³"With Certification" rates are to be used when the Elevation Certificate shows that the lowest floor elevation is equal to or greater than the community's elevation requirement.

⁴"Without Certification" rates are to be used only on Post-FIRM structures without an Elevation Certificate or when the Elevation Certificate shows that the lowest floor elevation of a Post-FIRM structure is less than the community's elevation requirement.

***SUBMIT FOR RATING.

TABLE 4B. RCBAP LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

REGULAR PROGRAM -- POST-FIRM CONSTRUCTION

FIRM ZONES A1-A30, AE -- BUILDING RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE ¹	BUILDING TYPE		
	ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR WITH BASEMENT/ENCLOSURE
+4	.18/.08	.18/.08	.18/.08
+3	.18/.08	.18/.08	.18/.08
+2	.24/.08	.18/.08	.18/.08
+1	.43/.08	.25/.08	.19/.08
0	.74/.08	.48/.08	.39/.08
-1 ²	1.87/.76	1.58/.70	.94/.47
-2	***	***	***

FIRM ZONES A1-A30, AE -- CONTENTS RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE ¹	CONTENTS LOCATION			
	LOWEST FLOOR ONLY - ABOVE GROUND LEVEL (NO BASEMENT/ENCLOSURE)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER FLOORS (NO BASEMENT/ENCLOSURE)	BASEMENT/ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL- MORE THAN ONE FULL FLOOR
+4	.38/.12	.38/.12	.38/.12	.35/.12
+3	.38/.12	.38/.12	.38/.12	.35/.12
+2	.38/.12	.38/.12	.38/.12	.35/.12
+1	.59/.12	.41/.12	.38/.12	.35/.12
0	1.10/.12	.72/.12	.40/.12	.35/.12
-1 ²	3.01/.75	1.78/.58	.48/.12	.35/.12
-2	***	***	***	.35/.12

¹If LF is -1 because of attached garage, submit application for special consideration; rate may be lower.

²Use Submit-for-Rate guidelines if the enclosure below the lowest floor of an elevated building or if the crawl space (under-floor space) that has its interior floor within 2 feet below grade on all sides, which is used for rating, is 1 or more feet below BFE.

*****SUBMIT FOR RATING.**

TABLE 4C. RCBAP LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)

UNNUMBERED ZONE A - WITHOUT BASEMENT/ENCLOSURE¹

ELEVATION DIFFERENCE TO NEAREST FOOT	BUILDING	CONTENTS ²	TYPE OF ELEVATION CERTIFICATE
+5 OR MORE	.30/.10	.62/.12	NO ESTIMATED BASE FLOOD ELEVATION ³
+2 TO +4	.69/.12	.82/.17	
+1	1.27/.56	1.40/.63	
0 OR BELOW	***	***	
+2 OR MORE	.24/.08	.50/.12	WITH ESTIMATED BASE FLOOD ELEVATION ⁴
0 TO +1	.48/.10	.72/.15	
-1	1.74/.67	1.76/.74	
-2 OR BELOW	***	***	
NO ELEVATION CERTIFICATE	2.20/1.15	2.54/1.00	NO ELEVATION CERTIFICATE

¹Zone A building with basement (including crawl space below grade on all sides) or enclosure--Submit for Rating.

²For elevation rated policies, when contents are located one floor or more above lowest floor used for rating, use .35/.12.

³NO ESTIMATED BASE FLOOD ELEVATION: Elevation difference is the measured distance between the lowest floor of the building and the highest adjacent grade next to the building.

⁴WITH ESTIMATED BASE FLOOD ELEVATION: Elevation difference is the measured distance between the lowest floor of the building and the estimated BFE provided by the community or registered professional engineer, surveyor, or architect.

*****SUBMIT FOR RATING.**

**TABLE 4D. RCBAP LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)**

AR AND AR DUAL ZONES

**REGULAR PROGRAM – PRE-FIRM^{1,2} AND
POST-FIRM³ NOT ELEVATION-RATED RATES**

BUILDING TYPE	BUILDING	CONTENTS
NO BASEMENT	.52/.14	.94/.25
WITH BASEMENT	.60/.20	1.12/.38
WITH ENCLOSURE	.60/.22	1.12/.43

REGULAR PROGRAM — PRE-FIRM AND POST-FIRM ELEVATION-RATED RATES

BUILDING RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	BUILDING TYPE		
	ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR WITH BASEMENT/ENCLOSURE
+4	.18/.08	.18/.08	.18/.08
+3	.18/.08	.18/.08	.18/.08
+2	.24/.08	.19/.08	.18/.08
+1	.43/.08	.25/.08	.19/.08
0	.52/.14	.48/.08	.39/.08
-1 ⁴	See Footnote		

CONTENTS RATES

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	CONTENTS LOCATION			
	LOWEST FLOOR ONLY - ABOVE GROUND LEVEL (NO BASEMENT/ENCLOSURE)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER FLOORS (NO BASEMENT/ENCLOSURE)	BASEMENT/ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL- MORE THAN ONE FULL FLOOR
+4	.38/.12	.38/.12	.38/.12	.35/.12
+3	.38/.12	.38/.12	.38/.12	.35/.12
+2	.38/.12	.38/.12	.38/.12	.35/.12
+1	.59/.12	.41/.12	.38/.12	.35/.12
0	1.10/.12	.72/.12	.40/.12	.35/.12
-1 ⁴	See Footnote			

¹Start of construction or substantial improvement on or before 12/31/74, or before the effective date of the initial Flood Insurance Rate Map (FIRM).

²Base deductible is \$1,000.

³Base deductible is \$500.

⁴Use Pre-FIRM AR and AR Dual Zones Rate Table above.

**TABLE 4E. RCBAP LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE
(Basic/Additional)**

**REGULAR PROGRAM -- 1975-1981¹ -- POST-FIRM CONSTRUCTION²
FIRM ZONES V1-V30, VE -- BUILDING RATES**

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	BUILDING TYPE		
	ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR NO BASEMENT/ENCLOSURE	MORE THAN ONE FLOOR WITH BASEMENT/ENCLOSURE
0 ³	1.83/.34	1.46/.34	1.26/.34
-1 ⁴	3.99/2.08	3.65/2.08	2.56/1.88
-2	***	***	***

**REGULAR PROGRAM -- 1975-1981¹ -- POST-FIRM CONSTRUCTION²
FIRM ZONES V1-V30, VE -- CONTENTS RATES**

ELEVATION OF LOWEST FLOOR ABOVE OR BELOW BFE	CONTENTS LOCATION			
	LOWEST FLOOR ONLY - ABOVE GROUND LEVEL (NO BASEMENT/ENCLOSURE)	LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER FLOORS (NO BASEMENT/ENCLOSURE)	BASEMENT/ENCLOSURE AND ABOVE	ABOVE GROUND LEVEL - MORE THAN ONE FULL FLOOR
0 ³	2.94/.41	1.92/.45	1.08/.50	.55/.25
-1 ⁴	6.47/3.14	3.82/2.43	1.27/.50	.55/.25
-2	***	***	***	.55/.25

**REGULAR PROGRAM -- 1975-1981 -- POST-FIRM CONSTRUCTION²
UNNUMBERED V ZONE -- ELEVATED BUILDINGS**

SUBMIT FOR RATING

¹Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

²For 1981 Post-FIRM construction rating, refer to pages CONDO 19 and 20.

³These rates are to be used if the lowest floor of the building is at or above the BFE.

⁴Use Submit-for-Rate guidelines if the enclosure below the lowest floor of an elevated building, which is used for rating, is 1 or more feet below BFE.

***SUBMIT FOR RATING.

**TABLE 5A. RCBAP HIGH-RISE AND LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE**

1981 POST-FIRM V1-V30, VE ZONE RATES¹

**Elevated Buildings Free of Obstruction² Below the
Beam Supporting the Building's Lowest Floor**

Elevation of the bottom of the floor beam of the lowest floor above or below Base Flood Elevation adjusted for wave height at building site³	Building Rate	Contents Rate
+4 or more	.49	.40
+3	.59	.40
+2	.74	.53
+1	1.07	.85
0	1.38	1.27
- 1	1.82	1.76
- 2	2.40	2.40
- 3	3.18	3.25
-4 or lower	***	***

Rates above are only for elevated buildings. **Use *Specific Rating Guidelines* for non-elevated buildings.**

¹Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

²Free of Obstructions—The space below the lowest floor must be completely free of obstructions or any attachment to the building or may have:

- (1) Insect screening (provided that no additional supports are required for the screening), or
- (2) Open wood constructed lattice "breakaway walls" (at least 40 percent of the lattice construction must be open). These walls must be designed and installed to collapse under stress without jeopardizing the structural support of the building so that the impact on the building by abnormally high tides or wind-driven water is minimized.

³Wave height adjustment is not required in those cases where the Flood Insurance Rate Map indicates that the map includes wave height.

*****SUBMIT FOR RATING.** Include a copy of the variance, a recent photograph and blueprints (including a site grading plan if ocean front) with the Application, and a post-construction (or pre-construction if builder's risk) Elevation Certificate. Do **not** submit any premium with the application. No applicant for insurance on Post-FIRM construction or substantial improvement for which asterisks are shown (there is no risk premium rate) in the *Flood Insurance Manual* can obtain flood coverage until FEMA has approved the Application and established the risk premium for the building.

**TABLE 5B. RCBAP HIGH-RISE AND LOW-RISE CONDOMINIUM RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE**

1981 POST-FIRM V1-V30, VE ZONE RATES¹

**Elevated Buildings With Obstruction² Below the
Beam Supporting the Building's Lowest Floor**

Elevation of the bottom of the floor beam of the lowest floor above or below Base Flood Elevation adjusted for wave height at building site³	Building Rate	Contents Rate
+4 or more	.90	.50
+3	.99	.50
+2	1.13	.62
+1	1.40	.97
0	1.71	1.36
-1 ⁴	2.17	1.84
-2 ⁴	2.78	2.49
-3 ⁴	3.56	3.34
-4 or lower ⁴	***	***

¹Policies for 1975 through 1981 Post-FIRM and Pre-FIRM buildings in Zones VE and V1-V30 will be allowed to use the Post- '81 V Zone rate table if the rates are more favorable to the insured. See instructions on page RATE 23 for V Zone Optional Rating.

²With Obstruction -- The space below has an area of less than 300 square feet with breakaway solid walls or contains equipment below the BFE. If the space below has an area of 300 square feet or more or if any portion of the space below the elevated floor is enclosed with non-breakaway walls, submit for rating.

³Wave height adjustment is not required in those cases where the Flood Insurance Rate Map indicates that the map includes wave height.

⁴Use Submit-for-Rate guidelines if the enclosure below the lowest elevated floor of an elevated building, which is used for rating, is 1 or more feet below BFE.

■ *****SUBMIT FOR RATING.** Include a copy of the variance, a recent photograph and blueprints (including a site grading plan if ocean front) with the Application, and a post-construction (or pre-construction if builder's risk) Elevation Certificate. Do **not** submit any premium with the application. No applicant for insurance on Post-FIRM construction or substantial improvement for which asterisks are shown (there is no risk premium rate) in the *Flood Insurance Manual* can obtain flood coverage until FEMA has approved the Application and established the risk premium for the building.

**TABLE 5C. RCBAP HIGH-RISE AND LOW-RISE BUILDING RATES
(Including Townhouse/Rowhouse)
ANNUAL RATES PER \$100 OF COVERAGE**

1981 POST-FIRM V ZONE RATES

SUBMIT FOR RATING

X. CONDOMINIUM RATING EXAMPLES

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CONDOMINIUM RATING EXAMPLE 1

PRE-FIRM, LOW-RISE, WITH ENCLOSURE, COINSURANCE PENALTY, ZONE A

Regular Program

- Building Coverage: \$140,000
- Contents Coverage: \$100,000
- Condominium Type: Low-rise
- Flood Zone: A
- Occupancy: Other Residential
- # of Units: 6
- Date of Construction: Pre-FIRM
- Building Type: 3 Floors Including Enclosure
- Deductible: \$2,000/\$1,000
- Deductible Factor: .980
- Replacement Cost: \$600,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: \$480,000
- ICC Premium: \$75 (\$30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .75/.46 Contents: .96/.52

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM	
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM				
BUILDING	140,000	.75	1,050	0	.46	0	-21	140,000	1,029	
CONTENTS	20,000	.96	192	80,000	.52	416	-12	100,000	596	
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL ICC PREMIUM SUBTOTAL CRS PREMIUM DISCOUNT _____% SUBTOTAL	1,625 75 1,700 1,700
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE(MM/DD/YY) _____							PROBATION SURCHARGE		—	
							FEDERAL POLICY FEE		150	
							TOTAL PREPAID AMOUNT		1,850	

Premium Calculation:

1. Multiply Rate x \$100 of Coverage: Building: \$1,050 / Contents: \$608
2. Apply Deductible Factor: Building: .980 x \$1,050 = \$1,029 / Contents: .980 x \$608 = \$596
3. Premium Reduction: Building: \$1,050 - \$1,029 = \$21 / Contents: \$608 - \$596 = \$12
4. Subtotal: \$1,625
5. Add ICC Premium: \$75
6. Subtract CRS Discount: N/A
7. Subtotal: \$1,700
8. Probation Surcharge: N/A
9. Add Federal Policy Fee: \$150
10. Total Prepaid Premium: \$1,850

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION

Claim Payment is determined as follows:

$$\frac{(\text{Insurance Carried})}{(\text{Insurance Required})} \times (\text{Amount of Loss}) = (\text{Limit of Recovery})$$

$$\frac{140,000}{480,000} \times 100,000 = 29,167 - \text{Less Deductible}$$

(Coinsurance Penalty applies because minimum insurance amount of \$480,000 was not met.)

Building: .70/.32 Contents: .96/.60

1000

■

CONDOMINIUM RATING EXAMPLE 3

POST-FIRM, LOW-RISE, COINSURANCE PENALTY, ZONE AE

Regular Program

- Building Coverage: \$750,000
- Contents Coverage: \$100,000
- Condominium Type: Low-rise
- Flood Zone: AE
- Occupancy: Other Residential
- # of Units: 14
- Date of Construction: Post-FIRM
- Building Type: 2 Floors, No Basement/Enclosure
- Deductible: \$500/\$500
- Deductible Factor: 1.000
- Replacement Cost: \$1,120,000
- Elevation Difference: +1
- 80% Coinsurance Amount: \$896,000
- ICC Premium: \$6 (\$30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A

Determined Rates:

Building: .25/.08 Contents: .41/.12

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM	
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM				
BUILDING	700,000	.25	1,750	50,000	.08	40	0	750,000	1,790	
CONTENTS	20,000	.41	82	80,000	.12	96	0	100,000	178	
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL ICC PREMIUM SUBTOTAL CRS PREMIUM DISCOUNT _____% SUBTOTAL	1,968 6 1,974 1,974
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE (MM/DD/YY) _____							PROBATION SURCHARGE		—	
							FEDERAL POLICY FEE		330	
							TOTAL PREPAID AMOUNT		2,304	

Premium Calculation:

1. Multiply Rate x \$100 of Coverage: Building: \$1,790 / Contents: \$178
2. Apply Deductible Factor: Building: 1.000 x \$1,790 = \$1,790 / Contents: 1.000 x \$178 = \$178
3. Premium Reduction/Increase: Building: \$0 / Contents: \$0
4. Subtotal: \$1,968
5. Add ICC Premium: \$6
6. Subtract CRS Discount: N/A
7. Subtotal: \$1,974
8. Probation Surcharge: N/A
9. Add Federal Policy Fee: \$330
10. Total Prepaid Premium: \$2,304

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION

Claim Payment is determined as follows:

(Insurance Carried) 750,000 x (Amount of Loss) 300,000 = (Limit of Recovery) 251,116 - Less Deductible
 (Insurance Required) 896,000

(Coinsurance Penalty applies because minimum insurance amount of \$896,000 was not met.)

Building: .18/.08 Contents: .38/.12

May 1, 2004

CONDOMINIUM RATING EXAMPLE 5

PRE-FIRM, HIGH-RISE, STANDARD DEDUCTIBLE, COINSURANCE PENALTY, ZONE A

Regular Program

- Building Coverage: \$1,110,000
- Contents Coverage: \$100,000
- Condominium Type: High-rise
- Flood Zone: A
- Occupancy: Other Residential
- # of Units: 50
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, No Basement/Enclosure
- Deductible: \$1,000/\$1,000
- Deductible Factor: 1.000
- Replacement Cost: \$1,500,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: \$1,200,000
- ICC Premium: \$75 (\$30,000 Coverage)
- CRS Rating: 5
- CRS Discount: 25%

Determined Rates:

Building: .85/.14 Contents: .96/.41

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE PREM. REDUCTION/ INCREASE	BASIC AND ADDITIONAL TOTAL AMOUNT OF INSURANCE	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM			
BUILDING	150,000	.85	1,275	960,000	.14	1,344	0	1,110,000	2,619
CONTENTS	20,000	.96	192	80,000	.41	328	0	100,000	520
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED)							ANNUAL SUBTOTAL		3,139
<input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION:		
							<input type="checkbox"/> CREDIT CARD		
							<input type="checkbox"/> OTHER: _____		
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.							FEDERAL POLICY FEE		630
							TOTAL PREPAID AMOUNT		3,040
							SIGNATURE OF INSURANCE AGENT/BROKER _____		DATE (MM/DD/YY) _____

Premium Calculation:

1. Multiply Rate x \$100 of Coverage: Building: \$2,619 / Contents: \$520
2. Apply Deductible Factor: Building: 1.000 x \$2,619 = \$2,619 / Contents: 1.000 x \$520 = \$520
3. Premium Reduction/Increase: Building: \$0 / Contents: \$0
4. Subtotal: \$3,139
5. Add ICC Premium: \$75
6. Subtract CRS Discount: - \$804 (25%)
7. Subtotal: \$2,410
8. Probation Surcharge: N/A
9. Add Federal Policy Fee: \$630
10. Total Prepaid Premium: \$3,040

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION

Claim Payment is determined as follows:

(Insurance Carried) 1,110,000 x (Amount of Loss) 200,000 = (Limit of Recovery) 185,000 - Less Deductible
(Insurance Required) 1,200,000

(Coinsurance Penalty applies because minimum insurance amount of \$1,200,000 was not met.)

CONDOMINIUM RATING EXAMPLE 6

PRE-FIRM, HIGH-RISE, BASEMENT, MAXIMUM DISCOUNT, ZONE AE

Regular Program

- Building Coverage: \$3,000,000
- Contents Coverage: \$100,000
- Condominium Type: High-rise
- Flood Zone: AE
- Occupancy: Other Residential
- # of Units: 50
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, including Basement
- Deductible: \$5,000/\$5,000
- Deductible Factor: .920 (Maximum Total Discount of \$276 applies)
- Replacement Cost: \$3,750,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: \$3,000,000
- ICC Premium: \$75 (\$30,000 Coverage)
- CRS Rating: 8
- CRS Discount: 10%

Determined Rates:

Building: .90/.23 Contents: .96/.50

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE	BASIC AND ADDITIONAL	TOTAL PREMIUM	
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	PREM. REDUCTION/ INCREASE	TOTAL AMOUNT OF INSURANCE		
BUILDING	150,000	.90	1,350	2,850,000	.23	6,555	-276	3,000,000	7,629	
CONTENTS	20,000	.96	192	80,000	.50	400	0	100,000	592	
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED) <input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		ANNUAL SUBTOTAL ICC PREMIUM SUBTOTAL CRS PREMIUM DISCOUNT <u>10%</u> SUBTOTAL	8,221 75 8,296 -830 7,466
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. _____ SIGNATURE OF INSURANCE AGENT/BROKER DATE (MM/DD/YY)							PROBATION SURCHARGE		—	
							FEDERAL POLICY FEE		630	
							TOTAL PREPAID AMOUNT		8,096	

Premium Calculation:

1. Multiply Rate x \$100 of Coverage: Building: \$7,905 / Contents: \$592
2. Apply Deductible Factor: Building: .920 x \$7,905 = \$7,273 / Contents: .920 x \$592 = \$545
3. Premium Reduction: Building: \$276 (maximum discount since \$7,705 - \$7,273 = \$632 exceeds the maximum) / Contents: \$0
4. Subtotal: \$8,221
5. Add ICC Premium: \$75
6. Subtract CRS Discount: -\$830 (10%)
7. Subtotal: \$7,466
8. Probation Surcharge: N/A
9. Add Federal Policy Fee: \$630
10. Total Prepaid Premium: \$8,096

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION

Coinurance Penalty does not apply since the minimum insurance amount of 80% was met.

NOTE: The NFIP accepts premium only in whole dollars. If the discount for an optional deductible does not result in a whole dollar premium, round up if 50¢ or more; round down if less. Always submit gross premium.

Regular Program

- Determined Rates:**

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)			DEDUCTIBLE	BASIC AND ADDITIONAL	TOTAL PREMIUM
	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	AMOUNT OF INSURANCE	RATE	ANNUAL PREMIUM	PREM. REDUCTION/ INCREASE	TOTAL AMOUNT OF INSURANCE	
BUILDING	150,000	1.17	1,755	11,850,000	.04	4,740	0	12,000,000	6,495
CONTENTS	15,000	.72	108	0	.12		0	15,000	108
RATE TYPE: (ONE BUILDING PER POLICY—BLANKET COVERAGE NOT PERMITTED)						PAYMENT OPTION: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____	ANNUAL SUBTOTAL		6,603
<input type="checkbox"/> MANUAL <input type="checkbox"/> SUBMIT FOR RATING <input type="checkbox"/> ALTERNATIVE <input type="checkbox"/> V-ZONE RISK RATING FORM <input type="checkbox"/> MORTGAGE PORTFOLIO PROTECTION PROGRAM <input type="checkbox"/> PROVISIONAL RATING							ICC PREMIUM		6
							SUBTOTAL		6,609
							CRS PREMIUM DISCOUNT 5%		-330
							SUBTOTAL		6,279
THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.						PROBATION SURCHARGE		—	
						FEDERAL POLICY FEE		630	
						TOTAL PREPAID AMOUNT		6,909	
SIGNATURE OF INSURANCE AGENT/BROKER _____						DATE (MM/DD/YY) _____			

1. Multiply Rate x \$100 of Coverage:	Building: \$6,495 / Contents: \$108
2. Apply Deductible Factor:	Building: 1.000 x \$6,495 = \$6,495 / Contents: 1.000 x \$108 = \$108
3. Premium Reduction/Increase:	Building: \$0 / Contents: \$0
4. Subtotal:	\$6,603
5. Add ICC Premium:	\$6
6. Subtract CRS Discount:	- \$330 (5%)
7. Subtotal:	\$6,279
8. Probation Surcharge:	N/A
9. Add Federal Policy Fee:	\$630
10. Total Prepaid Premium:	\$6,909

Coinsurance Penalty does not apply since the minimum insurance amount of 80% was met.

May 1, 2004

1

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(Coinsurance Penalty applies because minimum insurance amount of \$14,400,000 was not met.)

PREFERRED RISK POLICY

NEW FOR MAY 2004

(New or Renewal Business Written On or After May 1, 2004)

- Combined building/contents coverage available for non-residential properties.
- Contents-only coverage available for all occupancies.
- Higher limits of \$250,000 building and \$100,000 contents coverage available for 1-4 family residential.
- Limits of \$500,000 building and \$500,000 contents coverage available for non-residential.
- Limit of \$100,000 contents-only coverage available for other residential.
- Decrease in ICC premium to \$1.00, and increase in Federal Policy Fee to \$11.00.

I. GENERAL DESCRIPTION

The Preferred Risk Policy (PRP) offers low-cost coverage to owners and tenants of eligible buildings located in the moderate-risk **B, C, and X Zones** in NFIP **Regular Program communities**.

The maximum one- to four-family residential coverage combination is \$250,000 building and \$100,000 contents. Up to \$100,000 contents-only coverage is available for other residential properties. The maximum non-residential coverage combination is \$500,000 building and \$500,000 contents.

Only one building can be insured per policy, and only one policy can be written on each building.

II. ELIGIBILITY REQUIREMENTS

A. Flood Zone

To be eligible for the PRP, the building must be in a B, C, or X Zone **on the effective date of the policy**. The flood map available at the time of the renewal offer determines a building's continued eligibility for the PRP. NFIP map grandfathering rules do not apply to the PRP.

B. Occupancy

Combined building/contents amounts of insurance are available for owners of single-family, two- to four-family, and non-residential

properties. Combined building and contents coverage is not available for other residential.

Contents-only coverage is available for tenants and owners of all occupancies.

C. Loss History

A building's eligibility for the PRP is based on the preceding requirements and on the building's flood loss history. If one of the following conditions exists, regardless of any change(s) in ownership of the building, then the building is **not eligible** for the PRP:

- 2 flood insurance claim payments, each more than \$1,000; or
- 3 or more flood insurance claim payments, regardless of amount; or
- 2 Federal flood disaster relief payments (including loans and grants), each more than \$1,000; or
- 3 Federal flood disaster relief payments (including loans and grants), regardless of amount; or
- 1 flood insurance claim payment and 1 Federal flood disaster relief payment (including loans and grants), each more than \$1,000.

D. Exclusions

- The PRP is **not available** in Special Flood Hazard Areas or in Emergency Program communities.

THE PRP AT A GLANCE

POLICY TYPE	OCCUPANCY/MAXIMUM LIMITS		
	1-4 Family	Other Residential	Non-Residential
Combined Building/Contents	\$250,000/ \$100,000	No Coverage	\$500,000/ \$500,000
Contents Only	\$100,000	\$100,000	\$500,000

NOTES: Condominium associations are not eligible for the Preferred Risk Policy. Individual condominium units are not eligible unless they qualify under one of the exceptions on page PRP 2.

- Other residential properties are **not eligible** for building coverage.
- Contents located entirely in a basement are **not eligible** for contents-only coverage.
- Condominium associations, unit owners, and their tenants are **not eligible** for the PRP, **except** for:
 - A townhouse/rowhouse building insured under the unit owner's name;
 - A detached, single-family dwelling insured under the unit owner's name.
 - Contents-only coverage for tenants occupying townhouse/rowhouse buildings or detached, single-family dwellings.
- Increased Cost of Compliance (ICC) coverage is **not available** for eligible condominium units. (See footnote 3 on page PRP 3.)

III. DOCUMENTATION

All Preferred Risk Policy new business applications must include documentation of eligibility for the PRP. Such applications must be accompanied by one of the following: a Letter of Map Amendment (LOMA) or Letter of Map Revision (LOMR); a copy of the most recent flood map marked to show the exact location and flood zone of the building; or a letter containing the same information and signed by the local community official; or an elevation certificate containing the same information and signed by a surveyor, engineer, architect, or local community official; or a flood zone determination certification that guarantees the accuracy of the information.

An agent writing through a Write Your Own (WYO) company should contact that company for guidance.

IV. RENEWAL

An eligible risk renews automatically without submission of a new application. If, during a policy term, the risk fails to meet the eligibility requirements, it will be ineligible for renewal as a PRP. Such a risk must be nonrenewed or rewritten as a conventional Standard Flood Insurance Policy (SFIP).

V. COVERAGE LIMITS

The elevated building coverage limitation provisions do not apply to a policy written as a PRP.

VI. REPLACEMENT COST COVERAGE

Replacement cost coverage applies **only if** the building is the principal residence of the insured and the building coverage chosen is at least 80 percent of the replacement cost of the building at the time of the loss, or the maximum coverage available under the NFIP.

VII. DISCOUNTS/FEES/ICC PREMIUM

- No Community Rating System discount is associated with the PRP.
- Probation fees will be charged.
- The Federal Policy Fee of \$11.00 is included in the premium and is not subject to commission.
- The ICC premium is included.

VIII. OPTIONAL DEDUCTIBLES

Optional deductibles are not available on PRPs.

IX. ENDORSEMENTS

The PRP may be endorsed to increase coverage midterm. See page END 5 for an example. Effective October 1, 2003, if the insured is rated for a Standard Flood Insurance Policy using other than B, C, or X zone rates, but is found to be in a B, C, or X zone and otherwise eligible for a PRP, the writing company will be allowed to endorse or cancel/rewrite the policy to a PRP going back 6 years.

X. CANCELLATION/NULLIFICATION

Effective October 1, 2003, a policy written in error as a Standard B, C, or X Zone policy and found to be eligible as a PRP at the beginning of the current term may be endorsed or rewritten as a PRP for the entire current policy term. The policy may be endorsed or cancelled/rewritten only if the following conditions are met:

- The request to endorse or cancel/rewrite the policy must be received during the current policy term.
- The policy has no open claim or closed paid claim.

The new PRP building coverage will be either equal to the building limit issued under the Standard B, C, or X Zone policy or the next higher limit available under the PRP if there is no PRP option equal to the Standard B, C, or X Zone building limit.

PRP COVERAGES AVAILABLE EFFECTIVE MAY 1, 2004

ONE- TO FOUR-FAMILY RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS¹

With Basement or Enclosure			Without Basement or Enclosure		
Building	Contents	Premium ^{2,3}	Building	Contents	Premium ^{2,3}
\$ 20,000	\$ 8,000	\$137	\$ 20,000	\$ 8,000	\$112
\$ 30,000	\$ 12,000	\$163	\$ 30,000	\$ 12,000	\$138
\$ 50,000	\$ 20,000	\$205	\$ 50,000	\$ 20,000	\$180
\$ 75,000	\$ 30,000	\$232	\$ 75,000	\$ 30,000	\$207
\$100,000	\$ 40,000	\$263	\$100,000	\$ 40,000	\$233
\$125,000	\$ 50,000	\$279	\$125,000	\$ 50,000	\$249
\$150,000	\$ 60,000	\$294	\$150,000	\$ 60,000	\$264
\$200,000	\$ 80,000	\$331	\$200,000	\$ 80,000	\$296
\$250,000	\$100,000	\$352	\$250,000	\$100,000	\$317

ALL RESIDENTIAL CONTENTS-ONLY COVERAGE^{1, 4}

Contents Above Ground Level More Than One Floor		All Other Locations (Basement-Only Not Eligible)	
Contents	Premium ²	Contents	Premium ²
\$ 8,000	\$ 39	\$ 8,000	\$ 61
\$ 12,000	\$ 53	\$ 12,000	\$ 86
\$ 20,000	\$ 81	\$ 20,000	\$116
\$ 30,000	\$ 93	\$ 30,000	\$131
\$ 40,000	\$105	\$ 40,000	\$146
\$ 50,000	\$117	\$ 50,000	\$156
\$ 60,000	\$129	\$ 60,000	\$166
\$ 80,000	\$153	\$ 80,000	\$181
\$100,000	\$177	\$100,000	\$196

NON-RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS¹

With Basement or Enclosure			Without Basement or Enclosure		
Building	Contents	Premium ^{2,3}	Building	Contents	Premium ^{2,3}
\$ 50,000	\$ 50,000	\$ 800	\$ 50,000	\$ 50,000	\$ 500
\$100,000	\$100,000	\$1,375	\$100,000	\$100,000	\$ 800
\$150,000	\$150,000	\$1,850	\$150,000	\$150,000	\$1,050
\$200,000	\$200,000	\$2,200	\$200,000	\$200,000	\$1,300
\$250,000	\$250,000	\$2,500	\$250,000	\$250,000	\$1,500
\$300,000	\$300,000	\$2,800	\$300,000	\$300,000	\$1,700
\$350,000	\$350,000	\$3,100	\$350,000	\$350,000	\$1,850
\$400,000	\$400,000	\$3,350	\$400,000	\$400,000	\$2,000
\$500,000	\$500,000	\$3,850	\$500,000	\$500,000	\$2,300

NON-RESIDENTIAL CONTENTS-ONLY COVERAGE^{1, 4}

Contents Above Ground Level More Than One Floor		All Other Locations (Basement-Only Not Eligible)	
Contents	Premium ²	Contents	Premium ²
\$ 50,000	\$121	\$ 50,000	\$ 275
\$100,000	\$231	\$100,000	\$ 500
\$150,000	\$321	\$150,000	\$ 675
\$200,000	\$381	\$200,000	\$ 850
\$250,000	\$441	\$250,000	\$1,000
\$300,000	\$501	\$300,000	\$1,150
\$350,000	\$561	\$350,000	\$1,300
\$400,000	\$621	\$400,000	\$1,450
\$500,000	\$741	\$500,000	\$1,700

¹Add the \$50.00 Probation Surcharge, if applicable.

²Premium includes Federal Policy Fee of \$11.00.

³Premium includes ICC premium of \$1.00. Deduct this amount if the risk is a townhouse/rowhouse condominium unit.

⁴Contents-only policies are not available for contents located in basement only.

NOTES: Condominium associations are not eligible for the Preferred Risk Policy. Individual condominium units are not eligible unless they qualify under one of the exceptions on page PRP 2.

The deductibles apply separately to building and contents. Building deductible, \$500. Contents deductible, \$500.

■ XI. COMPLETION OF THE FLOOD INSURANCE PREFERRED RISK POLICY APPLICATION

A. Policy Status

In the upper right corner of the form, check the appropriate box to indicate if the application is for a NEW policy or a RENEWAL of an existing policy. If the application is for a renewal, enter the current NFIP policy number.

B. Policy Term

The PRP is available only for 1-year terms.

1. Check the appropriate box to indicate who should receive the renewal bill. If BILL FIRST MORTGAGEE is checked, complete "First Mortgagee" section. If BILL SECOND MORTGAGEE, BILL LOSS PAYEE, or BILL OTHER is checked, provide mailing instructions in "Second Mortgagee or Other" section.
2. Enter the policy effective date and policy expiration date (month-day-year). The effective date of the policy is determined by adding the appropriate waiting period to the date of application in the "Signature" section. The standard waiting period is 30 days. Refer to the General Rules Section, page GR 7, for the applicable waiting period.

C. Agent Information

Enter the agent's (producer's) name, agency name and number, address, city, state, ZIP Code, telephone number, fax number, and tax I.D. Number or Social Security Number.

D. Insured's Mailing Address

1. Enter the name, mailing address, city, state, ZIP Code, telephone number, and Social Security Number of the insured.
2. If the insured's mailing address is a post office box or a rural route number, or if the address of the property to be insured is different from the mailing address, complete the "Property Location" section of the application.

E. Disaster Assistance

1. Check YES if flood insurance is being required for disaster assistance. Enter the insured's case file number, tax I.D. Number, or Social Security Number on the line for CASE FILE NUMBER.
2. In the "Second Mortgagee or Other" block, identify the government (disaster) agency, and enter the complete name and mailing address of the disaster agency.
3. If NO is checked, no other information is required.

F. First Mortgagee

Enter the name, mailing address, city, state, ZIP Code, telephone number, fax number, and loan number of the first mortgagee.

G. Second Mortgagee or Other

1. Identify additional mortgagees by checking the appropriate box and entering the loan number, mortgagee's name, mailing address, telephone number, and fax number.
2. If more than one additional mortgagee or disaster assistance agency exists, provide the requested information on the producer's letterhead.

H. Property Location

1. Check YES if the location of the property being insured is the same as the insured's mailing address entered in the "Insured Mailing Address" section. Leave the rest of this section blank unless there is more than one building at the property location.
2. If more than one building is at the location of the insured property, use this section to specifically identify the building to be insured. Briefly describe the building or submit a sketch showing the location of insured buildings to assist the NFIP in matching the policy number to the specific building insured.
3. If NO, provide the address or location of the property to be insured.

4. If the insured's mailing address is a post office box or rural route number, give the street address, legal description, or geographic location of the property.

I. Community

1. Enter the name of the county or parish where the property is located.
2. Check YES if the property is located in an unincorporated area of the county; otherwise, check NO.
3. Enter the community identification number, map panel number, and revision suffix for the community where the property is located. Community number and status may be obtained by calling the writing company, consulting a local community official, or referencing the NFIP *Community Status Book* online at www.fema.gov/fema/csb.shtm.
4. Enter the Flood Insurance Rate Map zone.

J. Building and Contents

Complete all required information in this section.

1. Check building occupancy: Single Family, 2-4 Family, Other Residential, or Non-Residential (incl. Hotel/Motel).
2. Enter date of construction.
3. Check building type. If the building has a basement or enclosure, count the basement or enclosure as a floor. If the building type is a manufactured (mobile) home/travel trailer on foundation, enter the make, model, and serial number in the block at the bottom of this section.

4. Check the "Y" box (YES) or the "N" box (NO) for "CONDO UNIT" and "TOWNHOUSE/ROWHOUSE CONDO UNIT."
5. Check location of building's contents. (Contents located entirely in a basement are not eligible for contents-only coverage.)
6. Check YES if the building is the insured's principal residence; otherwise, check NO.
7. Using normal company practice, estimate the replacement cost value and enter the value in the space provided. Include the cost of the building foundation when determining the replacement cost value.

K. Notice

If the answer to either question A or question B is YES, this risk is not eligible for the Preferred Risk Policy

L. Premium

1. Enter the coverage selected, and the premium, from the appropriate table on the back of the application form.
2. Add the \$50.00 Probation Surcharge, if applicable. Deduct \$1.00 if this is an application for a townhouse/rowhouse condominium unit.

M. Signature [and Date]

The application cannot be processed without the signature and date. Total premium, payable to the National Flood Insurance Program, must accompany the application.

**U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY**

National Flood Insurance Program

FLOOD INSURANCE PREFERRED RISK POLICY APPLICATION

O.M.B. No. 1660-0006 Expires July 31, 2006

☐ NEW
☐ RENEWAL

CURRENT POLICY NUMBER
FL _____
IF NEW, LEAVE BLANK

POLICY TERM	DIRECT BILL INSTRUCTIONS: <input type="checkbox"/> BILL INSURED <input type="checkbox"/> BILL FIRST MORTGAGEE <input type="checkbox"/> BILL SECOND MORTGAGEE <input type="checkbox"/> BILL LOSS PAYEE <input type="checkbox"/> BILL OTHER		WAITING PERIOD: <input type="checkbox"/> STANDARD 30-DAY <input type="checkbox"/> LOAN-NO WAITING	
	POLICY PERIOD IS FROM _____ TO _____ 12:01 A.M. LOCAL TIME AT THE INSURED PROPERTY LOCATION			
AGENT INFORMATION	ADDRESS, TELEPHONE NO., AND FAX NO. OF LICENSED PROPERTY OR CASUALTY INSURANCE AGENT OR BROKER: _____ _____ _____ AGENCY NO.: _____ AGENT'S TAX ID <input type="checkbox"/> T OR SSN <input type="checkbox"/> S _____		INSURED'S MAILING ADDRESS	NAME, TELEPHONE NUMBER AND MAILING ADDRESS OF INSURED: _____ _____ _____ _____ INSURED'S SOCIAL SECURITY NUMBER _____
DISASTER ASSISTANCE	IS INSURANCE REQUIRED FOR DISASTER ASSISTANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, CHECK THE GOVERNMENT AGENCY: <input type="checkbox"/> SBA <input type="checkbox"/> FHA <input type="checkbox"/> OTHER (PLEASE SPECIFY) _____ <input type="checkbox"/> FEMA <input type="checkbox"/> HHS _____ CASE FILE NUMBER _____		SECOND MORTGAGEE OR OTHER	IF SECOND MORTGAGEE, LOSS PAYEE OR OTHER IS TO BE BILLED, THE FOLLOWING MUST BE COMPLETED, INCLUDING THE NAME, TELEPHONE NO., FAX NO., AND ADDRESS. <input type="checkbox"/> 2ND MORTGAGEE <input type="checkbox"/> DISASTER AGENCY, SPECIFY _____ <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> IF OTHER, PLEASE SPECIFY _____ _____ _____ LOAN NUMBER _____
FIRST MORTGAGEE	NAME, TELEPHONE NO., FAX NO., AND ADDRESS OF FIRST MORTGAGEE INCLUDING LOAN NUMBER: _____ _____ _____ LOAN NUMBER _____		COMMUNITY	NAME OF COUNTY/PARISH _____ LOCATED IN AN UNINCORPORATED AREA OF THE COUNTY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO COMMUNITY NUMBER AND SUFFIX FOR LOCATION OF PROPERTY INSURED _____ FLOOD INSURANCE RATE MAP ZONE _____ INFORMATION SOURCE: <input type="checkbox"/> COMMUNITY OFFICIAL <input type="checkbox"/> FLOOD MAP <input type="checkbox"/> MORTGAGEE <input type="checkbox"/> OTHER, SPECIFY _____
PROPERTY LOCATION	IS INSURED LOCATION SAME AS INSURED MAILING ADDRESS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ENTER PROPERTY ADDRESS. IF RURAL, DESCRIBE PROPERTY LOCATION. (DO NOT USE P.O. BOX) _____ _____ _____			
BUILDING AND CONTENTS	BUILDING OCCUPANCY: <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> 2-4 FAMILY <input type="checkbox"/> OTHER RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL (INCL. HOTEL/MOTEL)	BUILDING TYPE (INCLUDING BASEMENT/ENCLOSURE): <input type="checkbox"/> ONE FLOOR <input type="checkbox"/> SPLIT LEVEL <input type="checkbox"/> TWO FLOORS <input type="checkbox"/> THREE OR MORE FLOORS <input type="checkbox"/> MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER ON FOUNDATION	CONTENTS LOCATED IN: <input type="checkbox"/> ENCLOSURE ONLY (BASEMENT ONLY NOT ELIGIBLE) <input type="checkbox"/> BASEMENT/ENCLOSURE AND ABOVE <input type="checkbox"/> LOWEST FLOOR ONLY ABOVE GROUND LEVEL <input type="checkbox"/> LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER FLOORS <input type="checkbox"/> ABOVE GROUND LEVEL MORE THAN ONE FULL FLOOR	INSURED'S PRINCIPAL RESIDENCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ESTIMATED REPLACEMENT COST AMOUNT \$ _____
	CONSTRUCTION DATE _____	IS BUILDING: CONDO UNIT <input checked="" type="checkbox"/> Y <input type="checkbox"/> N TOWNHOUSE/ROWHOUSE CONDO UNIT <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	MAKE, MODEL AND SERIAL NUMBER OF MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER _____	
NOTICE	THE FOLLOWING CONDITIONS SHOULD BE USED TO DETERMINE A BUILDING'S ELIGIBILITY FOR A PRP. A) IS THE BUILDING LOCATED IN A SPECIAL FLOOD HAZARD AREA ON A FLOOD HAZARD BOUNDARY MAP, OR ON A FLOOD INSURANCE RATE MAP ZONE A, AE, A1-A30, AO, AH, A99, V, VE, V1-V30, AR, AR DUAL ZONES ARI/AE, ARI/AH, ARI/AO, ARI/A1-A30, ARI/A? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO B) DO ANY OF THESE CONDITIONS, ARISING FROM ONE OR MORE OCCURENCES, EXIST? 2 LOSS PAYMENTS, EACH MORE THAN \$1,000 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 3 OR MORE LOSS PAYMENTS, REGARDLESS OF AMOUNT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 2 FEDERAL DISASTER RELIEF PAYMENTS, EACH MORE THAN \$1,000 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 3 FEDERAL DISASTER RELIEF PAYMENTS, REGARDLESS OF AMOUNT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 1 FLOOD INSURANCE CLAIM PAYMENT AND 1 FLOOD DISASTER RELIEF PAYMENT (INCLUDING LOANS AND GRANTS), EACH MORE THAN \$1,000. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO INSURANCE IS AVAILABLE UNDER THIS APPLICATION ONLY IF THE ANSWERS TO THESE QUESTIONS ARE NO.		PREMIUM	ENTER SELECTED OPTION FROM THE PREMIUM TABLES ON THE BACK OF THIS FORM. BUILDING AND CONTENTS COVERAGE COMBINATION BUILDING: \$ _____ CONTENTS: \$ _____ PREMIUM: \$ _____ CONTENTS-ONLY COVERAGE AMOUNT: \$ _____ PREMIUM: \$ _____
SIGNATURE	(ONE BUILDING PER POLICY - BLANKET COVERAGE NOT PERMITTED)			
	THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. THE PROPERTY OWNER AND I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SIGNATURE OF INSURANCE AGENT/BROKER _____ DATE _____ (MM/DD/YY) (OVER)			

N F I P C O P Y

FEMA Form 81-67, JUL 03

PREVIOUS EDITIONS ARE OBSOLETE.

F-089 (1/04)

SPECIAL NOTE TO INSURANCE AGENT: SEND ORIGINAL TO NFIP, KEEP SECOND COPY FOR YOUR RECORDS, GIVE THIRD COPY TO THE INSURED, AND FOURTH COPY TO MORTGAGEE.

1-4 FAMILY RESIDENTIAL BUILDING & CONTENTS COVERAGE COMBINATIONS¹

With Basement/Enclosure			Without Basement/Enclosure		
Building	Contents	Premium ^{2,3}	Building	Contents	Premium ^{2,3}
\$ 20,000	\$ 8,000	\$137	\$ 20,000	\$ 8,000	\$112
\$ 30,000	\$ 12,000	\$163	\$ 30,000	\$ 12,000	\$138
\$ 50,000	\$ 20,000	\$205	\$ 50,000	\$ 20,000	\$180
\$ 75,000	\$ 30,000	\$232	\$ 75,000	\$ 30,000	\$207
\$100,000	\$ 40,000	\$263	\$100,000	\$ 40,000	\$233
\$125,000	\$ 50,000	\$279	\$125,000	\$ 50,000	\$249
\$150,000	\$ 60,000	\$294	\$150,000	\$ 60,000	\$264
\$200,000	\$ 80,000	\$331	\$200,000	\$ 80,000	\$296
\$250,000	\$100,000	\$352	\$250,000	\$100,000	\$317

ALL RESIDENTIAL CONTENTS ONLY^{1,4}

Contents Located Above Ground Level More Than One Floor		All Other Locations (Basement Only Not Eligible)	
Contents	Premium ²	Contents	Premium ²
\$ 8,000	\$ 39	\$ 8,000	\$ 61
\$ 12,000	\$ 53	\$ 12,000	\$ 86
\$ 20,000	\$ 81	\$ 20,000	\$116
\$ 30,000	\$ 93	\$ 30,000	\$131
\$ 40,000	\$105	\$ 40,000	\$146
\$ 50,000	\$117	\$ 50,000	\$156
\$ 60,000	\$129	\$ 60,000	\$166
\$ 80,000	\$153	\$ 80,000	\$181
\$100,000	\$177	\$100,000	\$196

NON-RESIDENTIAL BUILDING & CONTENTS COVERAGE COMBINATIONS¹

With Basement/Enclosure			Without Basement/Enclosure		
Building	Contents	Premium ^{2,3}	Building	Contents	Premium ^{2,3}
\$ 50,000	\$ 50,000	\$ 800	\$ 50,000	\$ 50,000	\$ 500
\$100,000	\$100,000	\$1,375	\$100,000	\$100,000	\$ 800
\$150,000	\$150,000	\$1,850	\$150,000	\$150,000	\$1,050
\$200,000	\$200,000	\$2,200	\$200,000	\$200,000	\$1,300
\$250,000	\$250,000	\$2,500	\$250,000	\$250,000	\$1,500
\$300,000	\$300,000	\$2,800	\$300,000	\$300,000	\$1,700
\$350,000	\$350,000	\$3,100	\$350,000	\$350,000	\$1,850
\$400,000	\$400,000	\$3,350	\$400,000	\$400,000	\$2,000
\$500,000	\$500,000	\$3,850	\$500,000	\$500,000	\$2,300

NON-RESIDENTIAL CONTENTS ONLY^{1,4}

Contents Located Above Ground Level More Than One Floor		All Other Locations (Basement Only Not Eligible)	
Contents	Premium ²	Contents	Premium ²
\$ 50,000	\$121	\$ 50,000	\$ 275
\$100,000	\$231	\$100,000	\$ 500
\$150,000	\$321	\$150,000	\$ 675
\$200,000	\$381	\$200,000	\$ 850
\$250,000	\$441	\$250,000	\$1,000
\$300,000	\$501	\$300,000	\$1,150
\$350,000	\$561	\$350,000	\$1,300
\$400,000	\$621	\$400,000	\$1,450
\$500,000	\$741	\$500,000	\$1,700

¹Add the \$50.00 Probation Surcharge, if applicable.

²Premium includes Federal Policy Fee of \$11.00.

³Premium includes ICC premium of \$1.00. Deduct this amount if the risk is a townhouse/rowhouse condominium unit.

⁴Contents-only policies are not available for contents located in basement only.

NOTES: Condominium associations are not eligible for the Preferred Risk Policy. Individual condominium units are not eligible unless they qualify under one of the exceptions on page PRP 1 of the NFIP Flood Insurance Manual. The deductibles apply separately to building and contents. Building deductible, \$500. Contents deductible, \$500.

FLOOD INSURANCE PREFERRED RISK POLICY APPLICATION FEMA FORM 81-67

WARNING TO AGENTS AND INSURANCE APPLICANTS

The National Flood Insurance Act of 1968, as amended, prohibits a flood insurance policy from being newly issued or renewed on a property officially declared as being in violation of Section 1316 of the Act.

NONDISCRIMINATION

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

PRIVACY ACT

The information requested is necessary to process your Flood Insurance Application for a flood insurance policy. The authority to collect the information is Title 42, U.S. Code, Sections 4001 to 4028. Disclosures of this information may be made: to federal, state, tribal, and local government agencies, fiscal agents, your agent, mortgage servicing companies, insurance or other companies, lending institutions, and contractors working for us, for the purpose of carrying out the National Flood Insurance Program; to current Repetitive Loss Target Group (RLTG) property owners and Preferred Risk Policy (PRP) owners for the purpose of property loss history evaluation; to the American Red Cross for verification of nonduplication of benefits following a flooding event or disaster; to law enforcement agencies or professional organizations when there may be a violation or potential violation of law; to a federal, state or local agency when we request information relevant to an agency decision concerning issuance of a grant or other benefit, or in certain circumstances when a federal agency requests such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of an individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections. Solicitation of your Social Security Number (SSN) is authorized under Executive Order 9397. Providing the SSN, as well as the other information, is voluntary, but failure to do so may delay or prevent issuance of the flood insurance policy.

DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579 SECTION 7(B)

Solicitation of the Social Security Number (SSN) is authorized under provisions of Executive Order 9397, dated November 22, 1943. The disclosure of your SSN is voluntary. However, since many persons appearing in the Government's administrative records possess identical names, the use of your SSN would provide for your precise identification.

GENERAL

This information is provided pursuant to Public Law 96-511 (Paperwork Reduction Act of 1980, as amended), dated December 11, 1980, to allow the public to participate more fully and meaningfully in the Federal paperwork review process.

AUTHORITY

Public Law 96-511, amended, 44 U.S.C. 3507; and 5 CFR 1320.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 15 minutes per response. Burden means the time, effort, and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: U.S. Department of Homeland Security, Emergency Preparedness and Response Directorate, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0006). **NOTE: Do not send your completed form to this address.**

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